

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000194580

Entity Name: KIMBERLY CARROLL PHYSICAL THERAPY LLC

Current Principal Place of Business:

961687 GATEWAY BLVD
SUITE 101A
FERNANDINA BEACH, FL 32034

Current Mailing Address:

2657 AMELIA ROAD
FERNANDINA BEACH, FL 32034 US

FEI Number: 47-5647529

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARROLL, KIMBERLY M
2657 AMELIA ROAD
FERNANDINA BEACH, FL 32034 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title DR
Name CARROLL, KIMBERLY M
Address 2657 AMELIA ROAD
City-State-Zip: FERNANDINA BEACH FL 32034

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KIMBERLY CARROLL

DR

03/31/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date