## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000060143

**Entity Name: MEDTHERAPY LLC** 

**Current Principal Place of Business:** 

808 VENICE AVE VENICE, FL 34285

**Current Mailing Address:** 

33131 SERENE DR

PUNTA GORDA. FL 33982 US

FEI Number: 81-2020558 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MASON, FRANCES G ESQ 33131 SERENE DR PUNTA GORDA FL 33982 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.

Title

Name

Address City-State-Zip: **MGRM** 

33131 SERENE DR

PUNTA GORDA FL 33982

PHOENIX MEDICAL CONSULTING INC.

SIGNATURE:

Address

Electronic Signature of Registered Agent

Date

**FILED** Jan 13, 2022

**Secretary of State** 

2078311660CC

Authorized Person(s) Detail :

Title MGRM

**BMFA LLC** Name

808 VENICE AVE

VENICE FL 34285 City-State-Zip:

Title **MGRM** 

EMPHY PA Name

Address 9020 MISTY CREEK DR SARASOTA FL 34241 City-State-Zip:

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: CLAUDE J. MASON AS PRESIDENT OF PHOENIX MEDICAL CONSULTING INC.

**MGRM** 

01/13/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date