

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000086138

**Entity Name:** KITSON MEDCONNECT, LLC

**Current Principal Place of Business:**

590 GOLDEN GATE PT  
UNIT 9  
SARASOTA, FL 34236

**Current Mailing Address:**

590 GOLDEN GATE PT  
UNIT 9  
SARASOTA, FL 34236 US

**FEI Number:** 82-1604239

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

KITSON, KERRI E  
590 GOLDEN GATE PT  
UNIT 9  
SARASOTA, FL 34236 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:** KERRI E. KITSON

02/06/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           KITSON, KERRI E  
Address        590 GOLDEN GATE PT  
                  UNIT 9  
City-State-Zip: SARASOTA FL 34236

*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:** KERRI E KITSON

MANAGER

02/06/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date