

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000086138

**Entity Name:** KITSON MEDCONNECT, LLC

**Current Principal Place of Business:**

1800 NORTHGATE BLVD  
SUITE A-7  
SARASOTA, FL 34234

**Current Mailing Address:**

1800 NORTHGATE BLVD  
SUITE A-7  
SARASOTA, FL 34234 US

**FEI Number:** 82-1604239

**Certificate of Status Desired:** Yes

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

KITSON, KERRI E  
1800 NORTHGATE BLVD, A-7  
SARASOTA, FL 34234 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

03/27/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           KITSON, KERRI E  
Address        1800 NORTHGATE BLVD  
                  SUITE A-7  
City-State-Zip: SARASOTA FL 34234

*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

REGISTERED AGENT

03/27/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date