

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000117552

Entity Name: BANANA WIND MEDICAL GROUP, L.L.C.

Current Principal Place of Business:

35 WEST PINE STREET
218
ORLANDO, FL 32803

Current Mailing Address:

11335 COMMERCIAL STREET
ORLANDO, FL 32836 US

FEI Number: 37-1834398

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHAVER, ERIC LEE
35 W. PINE STREET
SUITE 218
ORLANDO, FL 32801 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	AMBR	Title	AMBR
Name	SHAVER, ERIC LEE	Name	FOGLE SHAVER, HEATHER JANE
Address	35 WEST PINE STREET	Address	35 WEST PINE STREET
City-State-Zip:	ORLANDO FL 32803	City-State-Zip:	ORLANDO FL 32803

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: HEATHER JANE FOGLE SHAVER

ADMINISTRATOR

04/20/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date