

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000129950

Entity Name: DAVIS EMERGENCY MEDICINE, LLC

Current Principal Place of Business:

1409 SOUNDVIEW TRAIL
GULF BREEZE, FL 32561

Current Mailing Address:

1409 SOUNDVIEW TRAIL
GULF BREEZE, FL 32561 US

FEI Number: 81-3260405

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, CRAIG M
1409 SOUNDVIEW TRAIL
GULF BREEZE, FL 32561 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 MGRM
Name DAVIS, CRAIG M
Address 1409 SOUNDVIEW TRAIL
City-State-Zip: GULF BREEZE FL 32561

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: CRAIG M DAVIS

MANAGING MEMBER

04/03/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date