

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000139833

**Entity Name:** MICHAEL G. DEGNAN, LLC**Current Principal Place of Business:**181 WEBB SUITE DRIVE STE A  
DAVENPORT, FL 33837**Current Mailing Address:**181 WEBB SUITE DRIVE STE A  
DAVENPORT, FL 33837 US**FEI Number:** 59-3599290**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DEGNAN, MICHAEL G  
181 WEBB SUITE DRIVE STE A  
DAVENPORT, FL 33837 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	MANAGER
Name	CANTO, EDUARDO MD
Address	181 WEBB SUITE DRIVE STE A
City-State-Zip:	DAVENPORT FL 33837

Title	MANAGER, PRESIDENT, CEO
Name	PICHARDO , NELSON MD
Address	181 WEBB SUITE DRIVE STE A
City-State-Zip:	DAVENPORT FL 33837

Title	MANAGER, COO
Name	PICHARDO, PATRICIA
Address	181 WEBB SUITE DRIVE STE A
City-State-Zip:	DAVENPORT FL 33837

Title	VICE-PRESIDENT
Name	WALTER, JOSEPH
Address	181 WEBB SUITE DRIVE STE A
City-State-Zip:	DAVENPORT FL 33837

*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:** PATRICIA PICHARDO

MANAGER

03/23/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date