

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000161420

Entity Name: CHARLOTTE COUNTY FOOT CLINICS LLC

Current Principal Place of Business:

13251 SW 45TH DR
MIRAMAR, FL 33027

Current Mailing Address:

4866 TAMIAMI TRAIL, STE C
PORT CHARLOTTE, FL 33952 US

FEI Number: 81-3738562

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUSH, MIKE A
4866 TAMIAMI TRAIL, STE C
PORT CHARLOTTE, FL 33952 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 SEM
Name BUSH, MIKE A
Address 13251 SW 45TH DR.
City-State-Zip: MIRAMAR FL 33027

Title DM
Name BUSH, NACERA
Address 13251 SW 45TH DR.
City-State-Zip: MIRAMAR FL 33027

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: MIKE BUSH

SEM

02/14/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date