

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000185081

**Entity Name:** GC MEDICINE, LLC**Current Principal Place of Business:**1350 TAMIAMI TRAIL NORTH SUITE 101  
NAPLES, FL 34102**Current Mailing Address:**1350 TAMIAMI TRAIL NORTH SUITE 101  
NAPLES, FL 34102 US**FEI Number: 38-4016904****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BRENNAN, MANNA & DIAMOND, P.L.  
27200 RIVERVIEW CENTER BOULEVARD, SUITE 31  
0  
BONITA SPRINGS, FL 34134 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	MGR
Name	GULFSHORE CONCIERGE MEDICINE, LLC	Name	HOCHMAN, ERIC DR.
Address	1350 TAMIAMI TRAIL NORTH SUITE 101	Address	1350 TAMIAMI TRAIL NORTH SUITE 101
City-State-Zip:	NAPLES FL 34102	City-State-Zip:	NAPLES FL 34102

*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: ERIC HOCHMAN****MANAGER****01/13/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date