

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000015901

Entity Name: INFECTIOUS DISEASE ASSOCIATES OF NAPLES LLC

Current Principal Place of Business:

2430 VANDERBILT BEACH RD
305
NAPLES, FL 34109

Current Mailing Address:

2430 VANDERBILT BEACH RD
305
NAPLES, FL 34109

FEI Number: 81-5038483

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MELIUS, KRISTY
2430 VANDERBILT BEACH RD
305
NAPLES, FL 34109 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 OTHER
Name MELIUS, KRISTY LEE
Address 2430 VANDERBILT BEACH RD #305
City-State-Zip: NAPLES FL 34109

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: KRISTY LEE MELIUS

RN

01/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date