

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000015901

Entity Name: INFECTIOUS DISEASE ASSOCIATES OF NAPLES LLC

Current Principal Place of Business:

800 GOODLETTE RD N.
STE 370
NAPLES, FL 34102

Current Mailing Address:

800 GOODLETTE RD N.
STE 370
NAPLES, FL 34102 US

FEI Number: 81-5038483

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BROWN, MARK ALLEN DR.
800 GODLETTE RD N
SUITE 370
NAPLES, FL 34102 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: MARK BROWN

02/17/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED REPRESENTATIVE
Name BROWN, MARK ALLEN DR.
Address 800 GOODLETTE RD N.
STE 370
City-State-Zip: NAPLES FL 34102

Title OFFICE MANAGER
Name MURILLO, SANDRA P
Address 800 GOODLETTE RD N.
STE 370
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: SANDRA MURILLO

OFFICE MANAGER

02/17/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date