

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000070881

**Entity Name:** 1645 MEDICAL LANE LLC

**Current Principal Place of Business:**

1307 CLARET COURT  
FT MYERS, FL 33919

**Current Mailing Address:**

1307 CLARET COURT  
FT MYERS, FL 33919 US

**FEI Number:** 59-3593484

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CLASP INC.  
3001 TAMiami TRAIL N, STE 400  
NAPLES, FL 34103 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 MGR  
Name TASCHNER, RONNY S  
Address 1307 CLARET COURT  
City-State-Zip: FT MYERS FL 33919

Title MGR  
Name TASCHNER, MARIE L  
Address 1307 CLARET COURT  
City-State-Zip: FT MYERS FL 33919

*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:** MARIE L TASCHNER

**MGR**

**03/05/2019**

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

\_\_\_\_\_  
Date