CLEARWATER	, FL 33761 US			
The above named	I entity submits this statement for the purpose of changing its	registered office or regis	tered agent, or both, in the State of Flor	rida.
SIGNATURE	E LANCE COHEN MD			01/27/2020
	Electronic Signature of Registered Agent			Date
Authorized	Person(s) Detail :			
Title	MGR	Title	MGR	
Name	ALIDINA, ARIF	Name	BARNA, JAMES	
Address	1330 S. FORT HARRISON	Address	1330 SOUTH FORT HARRISON	
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756	
Title	MGR	Title	MGR	
Name	COHEN, LANCE	Name	HOOD, DAVID	
Address	1330 SOUTH FORT HARRIZON	Address	1330 S. FORT HARRISON	
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756	
Title	MGR	Title	MGR	
Name	MILLER, MITCHELL	Name	MORGAN, JONATHAN	
Address	1330 S. FORT HARRISON	Address	1330 S. FORT HARRISON	
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756	
Title	MANAGER	Title	MANAGER	
Nome		Name	STEINIGER, JOSEPH DR.	

Name and Address of Current Registered Agent:

COHEN, LANCE MD 3190 MCMULLEN BOOTH ROAD

DOCUMENT# L17000129864

Entity Name: ENTA WESTCHASE LLC

Current Principal Place of Business:

1330 SOUTH FORT HARRISON AVE. CLEARWATER. FL 33756

Current Mailing Address:

1330 SOUTH FORT HARRISON AVE. CLEARWATER, FL 33756

FEI Number: 82-1955032

Certificate of Status Desired: No

CLEARWATER, FL 33761 US

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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: LANCE COHEN MD

01/27/2020

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 27, 2020 Secretary of State 6853190046CC

Αι

Title	MGR	Title	MGR
Name	ALIDINA, ARIF	Name	BARNA, JAMES
Address	1330 S. FORT HARRISON	Address	1330 SOUTH FORT HARRISON
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756
Title	MGR	Title	MGR
Name	COHEN, LANCE	Name	HOOD, DAVID
Address	1330 SOUTH FORT HARRIZON	Address	1330 S. FORT HARRISON
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756
Title	MGR	Title	MGR
Title Name	MGR MILLER, MITCHELL	Title Name	MGR MORGAN, JONATHAN
Name	MILLER, MITCHELL 1330 S. FORT HARRISON	Name	MORGAN, JONATHAN 1330 S. FORT HARRISON
Name Address	MILLER, MITCHELL 1330 S. FORT HARRISON	Name Address	MORGAN, JONATHAN 1330 S. FORT HARRISON
Name Address City-State-Zip:	MILLER, MITCHELL 1330 S. FORT HARRISON CLEARWATER FL 33756	Name Address City-State-Zip:	MORGAN, JONATHAN 1330 S. FORT HARRISON CLEARWATER FL 33756
Name Address City-State-Zip: Title	MILLER, MITCHELL 1330 S. FORT HARRISON CLEARWATER FL 33756 MANAGER	Name Address City-State-Zip: Title	MORGAN, JONATHAN 1330 S. FORT HARRISON CLEARWATER FL 33756 MANAGER
Name Address City-State-Zip: Title Name	MILLER, MITCHELL 1330 S. FORT HARRISON CLEARWATER FL 33756 MANAGER MULLER, CHRISTOPHER DR.	Name Address City-State-Zip: Title Name	MORGAN, JONATHAN 1330 S. FORT HARRISON CLEARWATER FL 33756 MANAGER STEINIGER, JOSEPH DR. 1330 SOUTH FORT HARRISON AVE.

Continues on page 2

MANAGING PARTNER

Authorized Person(s) Detail Continued :

Title	MANAGER	Title	MANAGER
Name	MERCHANT, FAISAL DR.	Name	MALLON, ANDREW DR.
Address	1330 SOUTH FORT HARRISON AVE.	Address	1330 SOUTH FORT HARRISON AVE.
City-State-Zip:	CLEARWATER FL 33756	City-State-Zip:	CLEARWATER FL 33756
Title	MANAGER	Title	MANAGER
Title Name	MANAGER GREENE, SCOTT DR.	Title Name	MANAGER CLAVENNA, MATTHEW DR.
Name	GREENE, SCOTT DR.	Name	CLAVENNA, MATTHEW DR.