

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000235323

Entity Name: TRACYSANSONMD, LLC

Current Principal Place of Business:

812 LORENA RD
LUTZ, FL 33548

Current Mailing Address:

3959 VAN DYKE RD
#178
LUTZ, FL 33558 US

FEI Number: 82-3426794

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANSON, TRACY
812 LORENA RD
LUTZ, FL 33548 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
Name SANSON, TRACY
Address 812 LORENA RD
City-State-Zip: LUTZ FL 33548

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: TRACY G. SANSON

MD, FACEP, OWNER

04/23/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date