

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000265043

Entity Name: CHARISMA HEALTH PLLC

Current Principal Place of Business:

3582 TIPPERARY DRIVE
MERRITT ISLAND, FL 32953

Current Mailing Address:

3582 TIPPERARY DRIVE
MERRITT ISLAND, FL 32953 US

FEI Number: 84-3732990

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GLOVER, TOM
7901 4TH STREET N
300
ST. PETERSBURGH, FL 33702 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 WASIL, BUSHRA I
Address 3582 TIPPERARY DRIVE
City-State-Zip: MERRITT ISLAND FL 32953

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: BUSHRA WASIL

MGR

03/18/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date