

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000099021

**Entity Name:** 14 SUNTREE PLACE, LLC

**Current Principal Place of Business:**

111 E HIBISCUS BOULEVARD  
MELBOURNE, FL 32901

**Current Mailing Address:**

111 E HIBISCUS BOULEVARD  
MELBOURNE, FL 32901 US

**FEI Number:** 85-0689879

**Certificate of Status Desired:** No

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

DEAN MEAD SERVICES LLC.  
420 S ORANGE AVENUE SUITE 700  
ORLANDO, FL 32801 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 TAMER AHMED, M.D.  
Address 111 E HIBISCUS BOULEVARD  
City-State-Zip: MELBOURNE FL 32901

Title MGR  
Name VISHNU PATEL, M.D.  
Address 111 E HIBISCUS BOULEVARD  
City-State-Zip: MELBOURNE FL 32901

Title MGR  
Name CLAUD P. SPIES M.D.  
Address 111 E HIBISCUS BOULEVARD  
City-State-Zip: MELBOURNE FL 32901

*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:** TABITHA ABRAHAM

**PRACTICE  
ADMINISTRATOR**

**02/11/2021**

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

\_\_\_\_\_  
Date