

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000371633

**Entity Name:** MED NEXUS PALM COAST, LLC.

**Current Principal Place of Business:**

145 CITY PLACE  
#301  
PALM COAST, FL 32164

**Current Mailing Address:**

180 BROOKHAVEN COURT S  
PALM COAST, FL 32164 US

**FEI Number:** 86-1968700

**Certificate of Status Desired:** No

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

CHIUMENTO, MICHAEL D III  
145 CITY PLACE  
#301  
PALM COAST, FL 32164 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 G.L.N. REALTY, INC.  
Address 968 LAKE BALDWIN LANE  
City-State-Zip: ORLANDO FL 32814

Title MGR  
Name DOUGLAS PROPERTY &  
DEVELOPMENT, INC.  
Address 145 CITY PLACE #300  
City-State-Zip: PALM COAST FL 32164

*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:** KRISTY DOUGLAS

**SEC**

**03/04/2024**

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

\_\_\_\_\_  
Date