

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000290814

Entity Name: DRN ANESTHESIA, LLC

Current Principal Place of Business:

1814 WOODPOINTE DRIVE
WINTER HAVEN, FL 33884

Current Mailing Address:

1814 WOODPOINTE DRIVE
WINTER HAVEN, FL 33884 US

FEI Number: 87-1670000

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NETTLOW, DONALD R JR.
1814 WOODPOINTE DRIVE
WINTER HAVEN, FL 33884 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 NETTLOW, AUDREY
Address 1814 WOODPOINTE DRIVE
City-State-Zip: WINTER HAVEN FL 33884

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: AUDREY NETTLOW

MANAGER

03/07/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date