

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000529195

**Entity Name:** VANTAGE POINT LEGAL NURSE CONSULTING LLC

**Current Principal Place of Business:**

4734 NW 87TH LANE  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

P.O. BOX 8850  
CORAL SPRINGS, FL 33075 US

**FEI Number: 87-4089095**

**Certificate of Status Desired: Yes**

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

DORMAN, CHRISTINE  
4734 NW 87TH LANE  
CORAL SPRINGS, FL 33067 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 DORMAN, CHRISTINE  
Address 4734 NW 87TH LANE  
City-State-Zip: CORAL SPRINGS FL 33067

*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: CHRISTINE DORMAN**

**MGR**

**02/24/2024**

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

\_\_\_\_\_ Date