

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000184121

Entity Name: ROGER ROQUE MD LLC

Current Principal Place of Business:

620 S LAKE ST.
SUITE 2
LEESBURG, FL 34748

Current Mailing Address:

P.O. BOX 491500
LEESBURG, FL 34748 US

FEI Number: 88-1809414

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WAGNER, DAVID P
700 WEST MAIN ST
LEESBURG, FL 34748 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 BACKER, SCOTT
Address 109 N 7TH ST
City-State-Zip: LEESBURG FL 34748

Title AMBR
Name PATHWAYS HEALTHCARE GROUP,
LLC
Address 700 WEST MAIN ST
City-State-Zip: LEESBURG FL 34748

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: SCOTT BACKER

MGR

01/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date