## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000204545

Entity Name: B MCREE ANESTHESIA LLC

**Current Principal Place of Business:** 

2217 GROVEWOOD RD CLEARWATER, FL 33764

**Current Mailing Address:** 

2217 GROVEWOOD RD CLEARWATER, FL 33764

FEI Number: 32-0689227 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCREE, BROOKS 2217 GROVEWOOD ROAD CLEARWATER, FL 33761 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

FILED Apr 21, 2023

**Secretary of State** 

4460676539CC

## Authorized Person(s) Detail:

Title MGRM

Name MCREE, BROOKS

Address 2217 GROVEWOOD RD

City-State-Zip: CLEARWATER FL 33764

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: BROOKS MCREE MGRM 04/21/2023