## 2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004159

Entity Name: WILSON MEDICAL MANAGEMENT LLC

**Current Principal Place of Business:** 

609 VIRGINIA DRIVE ORLANDO, FL 32803

**Current Mailing Address:** 

609 VIRGINIA DRIVE ORLANDO, FL 32803

FEI Number: 59-3543469 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEATHERFORD, WILLIAM PJR. 1150 LOUISIANA AVENUE, SUITE 4 WINTER PARK, FL 32789 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 23, 2015

**Secretary of State** 

CC8451075234

Authorized Person(s) Detail:

Title MGRM Title MBR

NamePENDERGRAFT, JAMES SIVNameWILLIAMS, DENISEAddress609 VIRGINIA DRIVEAddress609 VIRGINIA DRIVECity-State-Zip:ORLANDO FL 32803City-State-Zip:ORLANDO FL 32803

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: JAMES S PENDERGRAFT IV

**MGRM** 

04/23/2015