

**2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000005129

**Entity Name:** PALMETTO DIALYSIS CENTER LLC

**Current Principal Place of Business:**

3820 US 301 N  
ELLENTON, FL 34222

**Current Mailing Address:**

3820 US 301 N  
ELLENTON, FL 34222 US

**FEI Number:** 26-0722021

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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           MANAGER  
Name           CARLUCCI, JOSEPH A.  
Address        34 HAVEN WAY  
City-State-Zip: BEVERLY FARMS MA 01915

Title           MANAGER  
Name           KAMAL, SYED T.  
Address        17925 CACHET ISLE DRIVE  
City-State-Zip: TAMPA FL 33647

Title           MANAGER  
Name           PALOMINO, CELESTINO  
Address        4203 BAMBOO TERRACE  
City-State-Zip: BRADENTON FL 34210

*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:** JOSEPH A. CARLUCCI

MANAGER

06/04/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date