## 2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000002131

Entity Name: VERUS HEALTHCARE, LLC.

**Current Principal Place of Business:** 

725 COOL SPRINGS BOULEVARD SUITE 300

FRANKLIN, TN 37067

**Current Mailing Address:** 

725 COOL SPRINGS BOULEVARD SUITE 300 FRANKLIN, TN 37067 US

FEI Number: 20-3215567 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

Authorized Person(s) Detail:

Title MANAGER Title MANAGER

Name ROBERTS, RICHARDSON Name SMITH, ANDY

Address 725 COOL SPRINGS BLVD, SUITE 300 Address 725 COOL SPRINGS BLVD, SUITE 300

City-State-Zip: FRANKLIN TN 37067 City-State-Zip: FRANKLIN TN 37067

Title MANAGER

Name SEIBELS, ROBERT E. IV

Address 725 COOL SPRINGS BLVD, SUITE 300

City-State-Zip: FRANKLIN TN 37067

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: RICHARDSON ROBERTS

Electronic Signature of Signing Authorized Person(s) Detail

**MANAGER** 

04/23/2015

Date

FILED Apr 23, 2015

**Secretary of State** 

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