## **2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000007712

Entity Name: FORESIGHT MEDICAL, LLC

**Current Principal Place of Business:** 

1408 WESTSHORE BLVD. SUITE 1010 TAMPA, FL 33607

**Current Mailing Address:** 

1408 WESTSHORE BLVD. SUITE 1010 TAMPA, FL 33607

FEI Number: 46-2715878 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ELLIOTT, WILLIAM H 1408 WESTSHORE BLVD. SUITE 1010 TAMPA FL 33607 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 Feb 24, 2015

**Secretary of State** 

CC7910514872

Authorized Person(s) Detail:

TitleMGRTitleCOO & TREASURERNameSALENTINE, THOMAS J JR.NameELLIOTT, WILLIAM H

Address 8909 PURDUE ROAD Address 1408 WESTSHORE BLVD.

**SUITE 1010** 

City-State-Zip: INDIANAPOLIS IN 46268

City-State-Zip: TAMPA FL 33607

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.