

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 31, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000021945

1. Entity Name
NICHOLAS Z. OKESON, D.O., P.L.C.



Principal Place of Business

**13787 BELCHER ROAD SOUTH, STE. 100
LARGO, FL 33771**

Mailing Address

**13787 BELCHER ROAD SOUTH, STE. 100
LARGO, FL 33771**



01282005No Chg-LLC

CR2E083 (10/03)

4. FEI Number
76-0710443

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GASSMAN, ALAN S ESQ
1245 COURT STREET, STE. 102
CLEARWATER, FL 33756**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
OKESON, NICHOLAS Z
13787 BELCHER ROAD SOUTH, STE. 100
LARGO, FL 33771**

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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00000020/918
02/01/05-80064-024 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE: *Nicholas Z. Okeson* **Nicholas Z. Okeson, D.O.** 01/28/05 (727) 535-9899

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #