

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

DOCUMENT # L07000061753

1. Entity Name

ER QUICKCARE, P.L.



Principal Place of Business

9000 THE LANE
NAPLES FL 34109

Mailing Address

9000 THE LANE
NAPLES FL 34109

2. Principal Place of Business - No P.O. Box #

13030 LIVINGSTON BLVD

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite #3

City & State

NAPLES FL

City & State

4. FEI Number

74-3212445

Applied For

Not Applicable

Zip

34105

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

1st MOORE

CR2E083 (10/07)

6. Name and Address of Current Registered Agent

ROSENFELD, JEFFREY M M.D.
9000 THE LANE
NAPLES FL 34109

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

JEFFREY M. ROSENFELD M.D.

(NOTE: Registered agent signature required when registering)

2/8/8

DATE

FILE NOW!!! FEE IS \$138.75

After May 1, 2008, Fee Will Be \$538.75

Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete

PRESIDENT M.D.
JEFFREY M. ROSENFELD M.D.
9000 THE LANE
NAPLES FL 34109

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10. ADDITIONS/CHANGES

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SIGNATURE:

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

2/8/8

2395964529

DATE

TELEPHONE #