## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0000006401

Entity Name: OPEN MRI OF OKEECHOBEE, L.L.C.

Current Principal Place of Business:

115 NE 3RD STREET

SUITE A

OKEECHOBEE, FL 34972

**Current Mailing Address:** 

1615 NW FEDERAL HIGHWAY STUART, FL 34994 US

FEI Number: 65-1012990 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALKER, ANDREW TM.D. 1615 NW FEDERAL HWY STUART, FL 34972 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, 2016

**Secretary of State** 

CC0932264383

Authorized Person(s) Detail:

Title MGRM Title MGRM

NameWALKER, ANDREW TNameGALLANT, ANDREW SAddress1615 NW FEDERAL HWYAddress1615 NW FEDERAL HWY

City-State-Zip: STUART FL 34994 City-State-Zip: STUART FL 34994

Title MGRM

Name ZAYAS, HENRY R

Address 1615 NW FEDERAL HWY

City-State-Zip: STUART FL 34994

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: ANDREW T. WALKER

Electronic Signature of Signing Authorized Person(s) Detail

**MEMBER** 

02/24/2016

Date