

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000010651

**Entity Name:** MANATEE MEDICAL SPECIALISTS, LLC

**Current Principal Place of Business:**

2227 59TH WEST  
BRADENTON, FL 34209

**Current Mailing Address:**

P.O. BOX 14296  
BRADENTON, FL 34280

**FEI Number:** 65-1036396

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DORMAN, LORI MESQ  
LEWIS LONGMAN & WALKER P.A.  
1001 THIRD AVE WEST STE 670  
BRADENTON, FL 34205 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

**Authorized Person(s) Detail :**

Title MGR  
Name SAMMOUR, ADNAN K  
Address 2227 59TH ST WEST  
City-State-Zip: BRADENTON FL 34209

*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:** ADNAN K SAMMOUR

MGR

01/12/2021

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date