

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000011938

Entity Name: NIGEL A. SPIER, M.D., LLC

Current Principal Place of Business:

3990 SHERIDAN STREET
SUITE 207
HOLLYWOOD, FL 33021

Current Mailing Address:

3990 SHERIDAN STREET
SUITE 207
HOLLYWOOD, FL 33021

FEI Number: 65-1046375

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPIER, NIGEL AM.D.
3837 SW 53RD PLACE
FT LAUDERDALE, FL 33312 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 MGRM
Name SPIER, NIGEL AM.D
Address 3837 SW 53RD PL
City-State-Zip: FT LAUDERDALE FL 33312

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NIGEL SPIER

OWNER

02/20/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date