

**2018 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:**

NIGEL A. SPIER MD LLC  
3251 SW 51ST STREET  
FORT LAUDERDALE, FL 33312-7916 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:** NIGEL SPIER

03/21/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name SPIER, NIGEL ALEXANDER  
Address 3251 SW 51ST STREET  
City-State-Zip: FORT LAUDERDALE FL 33312-7916

*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:** NIGEL SPIER

MGRM

03/21/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date