

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000015382

**Entity Name:** CORNERSTONE MEDICAL CARE OF BRANDON, P.L.

**Current Principal Place of Business:**

500 VONDERBURG DRIVE  
EAST TOWER, SUITES 101-102  
BRANDON, FL 33511-5968

**Current Mailing Address:**

500 VONDERBURG DRIVE  
EAST TOWER, SUITES 101-102  
BRANDON, FL 33511-5968 US

**FEI Number:** 59-3689019

**Certificate of Status Desired:** No

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

FERENCZY-ZUMPARO, JASON  
500 VONDERBURG DR, STE 102  
BRANDON, FL 33511 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:** JASON FERENCZY-ZUMPARO

02/26/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name ANTONIO V ZUMPARO MD PA  
Address 500 VONDERBURG DRIVE #102  
City-State-Zip: BRANDON FL 33511

Title MGRM  
Name JULIO A ENRIQUEZ MD PA  
Address 500 VONDERBURG DRIVE #102  
City-State-Zip: BRANDON FL 33511

*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:** JULIO A ENRIQUEZ

MGRM

02/26/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date