

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000023857

Entity Name: PHYSICIAN PROPERTIES, LLC

Current Principal Place of Business:

2430 JENKS AVENUE
PANAMA CITY, FL 32405

Current Mailing Address:

3220 COUNTRY CLUB DR
LYNN HAVEN, FL 32444 US

FEI Number: 05-0531036

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NANJI, KIRAN K
3220 COUNTRY CLUB DR
LYNN HAVEN, FL 32444 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	Title	MGRM
Name	NANJI, KIRAN K	Name	GAITHER, FRED EII
Address	3220 COUNTRY CLUB DR	Address	206 TIMBER LANE
City-State-Zip:	LYNN HAVEN FL 32444	City-State-Zip:	PANAMA CITY FL 32405

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: KIRAN NANJI

MGRM

04/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date