

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005826

Entity Name: SHERIDAN MEDICAL BUILDING, L.L.C.

Current Principal Place of Business:

4420 SHERIDAN ST.
HOLLYWOOD, FL 33021

Current Mailing Address:

PO BOX 816728
HOLLYWOOD, FL 33081

FEI Number: 59-1441118

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MELINE, SAMUEL M
3501 KEYSER AVE
UNIT 18
HOLLYWOOD, FL 33021 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 MELINE, SAMUEL M
Address PO BOX 816728
City-State-Zip: HOLLYWOOD FL 33081

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: SAMUEL M MELINE

MANAGING PARTNER

02/01/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date