

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020172

Entity Name: THOMAS R. FANN, DPM, PL

Current Principal Place of Business:

1120 S.R. 436
SUITE 1400
CASSELBERRY, FL 32707

Current Mailing Address:

1120 S.R. 436
SUITE 1400
CASSELBERRY, FL 32707

FEI Number: 20-0031779

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FANN, THOMAS RDPM
1120 S.R. 436
SUITE 1400
CASSELBERRY, FL 32707 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 FANN, THOMAS R
Address 1120 S. R. 436 SUITE 1400
City-State-Zip: CASSELBERRY FL 32707

Title MGR
Name FANN, JULIANA M
Address 1120 S. R. 436 SUITE 1400
City-State-Zip: CASSELBERRY FL 32707

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: JULIANA M FANN

MANAGER

02/28/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date