

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000035029

Entity Name: NAPLES INTERVENTIONAL CARDIAC ELECTROPHYSIOLOGY,
L.L.C.

FILED
Feb 26, 2014
Secretary of State
CC8444243377

Current Principal Place of Business:

311 TAMIAMI TRAIL NORTH
SUITE 201
NAPLES, FL 34102

Current Mailing Address:

311 TAMIAMI TRAIL NORTH
SUITE 201
NAPLES, FL 34102

FEI Number: 20-1095753

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GURSOY, SINAN
311 TAMIAMI TRAIL NORTH
SUITE 201
NAPLES, FL 34102 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
Name NAPLES INTERVENTIONAL CARDIAC
ELECTROPHYSI
Address 311 TAMIAMI TRAIL NORTH SUITE 201
City-State-Zip: NAPLES FL 34102

Title MGRM
Name A. SINAN GURSOY, M.D., P.A.
Address 311 TAMIAMI TRAIL NORTH
SUITE 201
City-State-Zip: NAPLES FL 34102

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: SINAN GURSOY MD

PRESIDENT

02/26/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date