

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000035517

Entity Name: BOULEVARD URGENT CARE PLLC

Current Principal Place of Business:

1808 E. SIIVER SPRINGS BLVD.
OCALA, FL 34470

Current Mailing Address:

1808 E. SIIVER SPRINGS BLVD.
OCALA, FL 34470

FEI Number: 20-1104069

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MACALUSO, RENEE CMD
2880 SE 31ST STREET
OCALA, FL 34471 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 MACALUSO, RENEE C
Address 1808 E. SILVER SPRINGS BLVD.
City-State-Zip: Ocala FL 34470

Title MANAGING MEMBER
Name HEROLD, NICHOLE
Address 1808 E. SIIVER SPRINGS BLVD.
City-State-Zip: Ocala FL 34470

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NICHOLE HEROLD

PRACTICE MANAGER

02/04/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date