## 2014 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: Yes

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

FILED Feb 06, 2014

**Secretary of State** 

CC4848671905

Authorized Person(s) Detail:

 Title
 MGR
 Title
 MANAGING MEMBER

 Name
 MACALUSO, RENEE C
 Name
 HEROLD, NICHOLE

Address 1808 E. SILVER SPRINGS BLVD. Address 1808 E. SIIVER SPRINGS BLVD.

City-State-Zip: OCALA FL 34470 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NICHOLE HEROLD

MANAGEMENT MEMBER

02/06/2014