

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000044111

**Entity Name:** FLORIDA ACADEMIC DERMATOLOGY CENTERS, LLC

**Current Principal Place of Business:**

475 BILTMORE WAY  
SUITE 207  
CORAL GABLES, FL 33134

**Current Mailing Address:**

4000 HOLLYWOOD BLVD  
SUITE 215-S  
HOLLYWOOD, FL 33021 US

**FEI Number:** 20-1238143

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

DERMCARE MANAGEMENT  
4000 HOLLYWOOD BLVD  
SUITE 215-S  
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:** JEFFREY SCHILLINGER

04/27/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name KERDEL, FRANCISCO A  
Address 475 BILTMORE WAY  
SUITE 207  
City-State-Zip: CORAL GABLES FL 33134

Title CEO  
Name SCHILLINGER, JEFFREY  
Address 3850 HOLLYWOOD BLVD  
SUITE 300  
City-State-Zip: HOLLYWOOD FL 33021

*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:** SCHILLINGER , JEFFREY

CEO

04/27/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date