

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000061383

Entity Name: THE KIDNEY AND HYPERTENSION CENTER, P.L.C.

Current Principal Place of Business:

306 SOUTH 10TH STREET
HAINES CITY, FL 33844

Current Mailing Address:

7350 FUTURES DR,
BLDG A, STE 1
ORLANDO, FL 32819 US

FEI Number: 20-1518859

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NAVANI, ANIL H
7350 FUTURES DR,
BLDG A, STE 1
ORLANDO, FL 32819 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 NAVANI, ANIL H
Address 7350 FUTURES DR,
BLDG A, STE 1
City-State-Zip: ORLANDO FL 32819

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: ANIL NAVANI

MGRM

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date