

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000057744

**Entity Name:** MZI HEALTHCARE, LLC

**Current Principal Place of Business:**

500 SOUTHBOROUGH DR.  
SOUTH PORTLAND, ME 04106

**Current Mailing Address:**

500 SOUTHBOROUGH DR.  
SOUTH PORTLAND, ME 04106 US

**FEI Number:** 20-2981537

**Certificate of Status Desired:** No

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

CT CORPORATION  
1200 S. PINE ISLAND RD.  
STE. 250  
PLANTATION, FL 33324 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:** ANGEL NUNEZ, ASST. SEC.

04/16/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title CEO  
Name SANNER, SCOTT  
Address 500 SOUTHBOROUGH DR.  
City-State-Zip: SOUTH PORTLAND ME 04106

Title CFO  
Name WATERHOUSE, FRANK  
Address 500 SOUTHBOROUGH DR.  
City-State-Zip: SOUTH PORTLAND ME 04106

*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:** SCOTT SANNER

CEO

04/16/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date