

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000066280

**Entity Name:** FLORIDA UROLOGICAL CONSULTING SERVICES, LLC

**Current Principal Place of Business:**

120 LANSING ISLAND DRIVE  
INDIAN HARBOUR BEACH, FL 32937

**Current Mailing Address:**

120 LANSING ISLAND DRIVE  
INDIAN HARBOUR BEACH, FL 32937

**FEI Number:** 20-3098841

**Certificate of Status Desired:** No

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

FRESE, GARY B  
2200 FRONT STREET  
MELBOURNE, FL 32901 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 SARACINO, ANTHONY M.D.  
Address 120 LANSING ISLAND DRIVE  
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

*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:** ANTHONY SARACINO MD

MGRM

01/11/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date