

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000122143

**Entity Name:** PALM BEACH BRAIN & SPINE, LLC

**Current Principal Place of Business:**

1447 MEDICAL PARK BLVD  
SUITE 101  
WELLINGTON, FL 33414

**Current Mailing Address:**

1447 MEDICAL PARK BLVD  
SUITE 101  
WELLINGTON, FL 33414

**FEI Number:** 03-0577493

**Certificate of Status Desired:** Yes

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

DARE, AMOS O DR.  
1447 MEDICAL PARK BLVD.  
SUITE 101  
WELLINGTON, FL 33414 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:** AMOS O. DARE, MD

03/08/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name DARE, AMOS O DR.  
Address 1447 MEDICAL PARK BLVD, SUITE 101  
City-State-Zip: WELLINGTON FL 33414

*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:** AMOS DARE M.D.

OFFICER

03/08/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date