

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000007796

**Entity Name:** PALM BEACH COMMONS CARDIOLOGY LLC

**Current Principal Place of Business:**

601 UNIVERSITY BLVD  
SUITE 206  
JUPITER, FL 33458

**Current Mailing Address:**

600 UNIVERSITY BLVD  
SUITE 200  
JUPITER, FL 33458

**FEI Number:** 20-4576798

**Certificate of Status Desired:** No

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

WAITE, DIANE  
600 UNIVERSITY BLVD  
SUITE 200  
JUPITER, FL 33458 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 MGR  
Name BREUER, GABRIEL EMD  
Address 600 UNIVERSITY BLVD SUITE 200  
City-State-Zip: JUPITER FL 33458

Title MGR  
Name CRANDALL, CHAUNCEY IV MD  
Address 600 UNIVERSITY BLVD SUITE 200  
City-State-Zip: JUPITER FL 33458

Title MGR  
Name VARGAS, AGUSTIN AMD  
Address 600 UNIVERSITY BLVD SUITE 200  
City-State-Zip: JUPITER FL 33458

Title MGRM  
Name VILLA, AUGUSTO EMD  
Address 600 UNIVERSITY BLVD SUITE 200  
City-State-Zip: JUPITER FL 33458

*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:** GABRIEL BREUER

**MGR**

**04/05/2018**

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

\_\_\_\_\_  
Date