

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000022572

Entity Name: CLINICAL INITIATIVES CONSULTING, PL

Current Principal Place of Business:

50 RIVER BEACH DRIVE
ORMOND BEACH, FL 32176

Current Mailing Address:

50 RIVER BEACH DRIVE
ORMOND BEACH, FL 32176 US

FEI Number: 26-0808239

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOENDER, RAYMOND
50 RIVERBEACH DRIVE
ORMOND BEACH, FL 32176 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: RAYMOND A. BOENDER

04/28/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name GIANNONI, MARY
Address 50 RIVER BEACH DRIVE
City-State-Zip: ORMOND BEACH FL 32176

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: MARY GIANNONI

MGRM

04/28/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date