#### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000050519

Entity Name: PODIATRY ASSOCIATES OF THE PALM BEACHES, LLC

FILED
Apr 30, 2015
Secretary of State
CC3645294881

### **Current Principal Place of Business:**

701 PARK AVENUE LAKE PARK, FL 33403

### **Current Mailing Address:**

1616 39TH STREET WEST PALM BEACH. FL 33407

FEI Number: 26-0189224 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

ETHEREDGE, KALI 1616 39TH STREET WEST PALM BEACH, FL 33407 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 ETHEREDGE, KALI Address 1616 39TH STREET

City-State-Zip: WEST PALM BEACH FL 33407

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: KALI ETHEREDGE

MGRM

04/30/2015 Date