

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000054779

Entity Name: CARITAS OBSTETRICS AND GYNECOLOGY OF NAPLES, PLLC

Current Principal Place of Business:

10502 SMOKEHOUSE BAY DRIVE
SUITE 201
NAPLES, FL 34120

Current Mailing Address:

10502 SMOKEHOUSE BAY DRIVE
SUITE 201
NAPLES, FL 34120 US

FEI Number: 26-0239773

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHN-WILLIAM M. TRAINER, III
10502 SMOKEHOUSE BAY DRIVE
SUITE 201
NAPLES, FL 34120 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 FLIPPIN-TRAINER, M.D., ANGELA D
Address 10502 SMOKEHOUSE BAY DRIVE
SUITE 201
City-State-Zip: NAPLES FL 34120

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: ANGELA D FLIPPIN-TRAINER, M.D.

OWNER

04/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date