2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2015
Secretary of State
CC3607025680

DOCUMENT# L07000077575

Entity Name: BRIAN D. HAAS, M.D., P.L.

Current Principal Place of Business:

415 BRIERCLIFF DRIVE
ORLANDO, FL 32806

Current Mailing Address:

415 BRIERCLIFF DRIVE
ORLANDO, FL 32806

FEI Number: 26-0609217

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHAIRES, BROODERSON AND GUERRERO
283 CRANES ROOST BLVD
SUITE 165
ALTAMONTE SPRINGS, FL 32701 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	Title	OFFICE SUPERVISOR
Name	HAAS, BRIAN DM.D.	Name	BLAKEMORE, DORIS E
Address	510 LONGMEADOW STREET	Address	415 BRIERCLIFF DRIVE
City-State-Zip:	CELEBRATION FL 34747	City-State-Zip:	ORLANDO FL 32806

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: DORIS BLAKEMORE OFFICE SUPERVISOR 01/08/2015

Electronic Signature of Signing Authorized Person(s) Detail — Date