

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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	415 BRIERCLIFF DRIVE	Address	415 BRIERCLIFF DRIVE
City-State-Zip:	ORLANDO FL 32806	City-State-Zip:	ORLANDO FL 32806
Title	OFFICE MANAGER		
Name	BACON, LINDSEY R		
Address	415 BRIERCLIFF DRIVE		
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: LINDSEY BACON

OFFICE MANAGER

03/20/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date