

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000106156

Entity Name: FLORIDA DERMATOLOGY SPECIALISTS, LLC

Current Principal Place of Business:

600 VILAGE SQUARE CROSSING
101
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

600 VILAGE SQUARE CROSSING
101
PALM BEACH GARDENS, FL 33410 US

FEI Number: 26-2603350

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAWRENCE S. KLITZMAN, P.A.
1391 SAWGRASS CORPORATE PARKWAY
SUNRISE, FL 33323 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 T & R ASSOCIATES, LLC
Address 600 VILLAGE SQUARE CROSSING
#101
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MGR
Name SCHIFF, THEODORE A
Address 600 VILLAGE SQUARE CROSSING
City-State-Zip: PALM BEACH GARDENS FL 33410

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: THEODORE SCHIFF

MGR

02/19/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date