#### 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000106888

Entity Name: PHYSICIAN PROTECTION, LLC

# **Current Principal Place of Business:**

1441 COURT STREET UNIT B

CLEARWATER, FL 33756

### **Current Mailing Address:**

4941 LEDGEWOOD DR. COMMERCE, MI 48382 US

FEI Number: 20-8422248 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

GRAHAM, PAUL C 1441 COURT ST UNIT B CLEARWATER, FL 33756 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

**FILED** Mar 02, 2023

**Secretary of State** 

5527716451CC

## Authorized Person(s) Detail:

Title MGR

GRAHAM, PAUL C Name 1441 COURT STREET Address

**UNIT B** 

CLEARWATER FL 33756 City-State-Zip:

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: PAUL GRAHAM

Electronic Signature of Signing Authorized Person(s) Detail

**PRESIDENT** 

03/02/2023

Date