

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000110793

Entity Name: ALLERGY & RHEUMATOLOGY ASSOCIATES, L.L.C.

Current Principal Place of Business:

5100 SEMINOLE BLVD.
ST. PETERSBURG, FL 33708

Current Mailing Address:

5100 SEMINOLE BLVD.
ST. PETERSBURG, FL 33708

FEI Number: 30-0446891

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GASSMAN, ALAN S
1245 COURT STREET, SUITE 102
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

Authorized Person(s) Detail :

Title DR.
Name SPUZA-MILORD, MICHELLE
Address 5100 SEMINOLE BLVD.
City-State-Zip: ST, PETERSBURG FL 33708

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHELLE SPUZA-MILORD

PHYSICIAN OWNER

02/17/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date