

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000060436

Entity Name: LINEBAUGH OFFICE, LLC**Current Principal Place of Business:**7700 MASSACHUSETTS AVE
NEW PORT RICHEY, FL 34653-3024**Current Mailing Address:**7700 MASSACHUSETTS AVE
NEW PORT RICHEY, FL 34653-3024 US**FEI Number:** 26-2837872**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KHAN, HAIDER A DR.
7700 MASSACHUSETTS AVE
NEW PORT RICHEY, FL 34653-3024 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:** HAIDER A KHAN, MD

04/29/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MANAGING MEMBER
Name	KHAN, NAZEER DR.
Address	7700 MASSACHUSETTS AVE
City-State-Zip:	NEW PORT RICHEY FL 34653-3024

Title	MANAGER
Name	KHAN, SAFIA H
Address	7700 MASSACHUSETTS AVE
City-State-Zip:	NEW PORT RICHEY FL 34653-3024

Title	MANAGER
Name	KHAN, SABIHA
Address	7700 MASSACHUSETTS AVE
City-State-Zip:	NEW PORT RICHEY FL 34653-3024

Title	MANAGER
Name	KHAN, HAIDER A DR.
Address	7700 MASSACHUSETTS AVE
City-State-Zip:	NEW PORT RICHEY FL 34653-3024

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: DR NAZEER KHAN

MANAGING MEMBER

04/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date