

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000089490

Entity Name: CENTRAL FLORIDA REALTY MEDICS LLC**Current Principal Place of Business:**10027 UNIVERSITY BLVD
ORLANDO, FL 32817**Current Mailing Address:**5401 N CENTRAL EXPY, SUITE 300
DALLAS, TX 75205 US**FEI Number:** 26-3389523**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:** LISA DUBOIS

04/18/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	WECLEW, VICTOR T
Address	10027 UNIVERSITY BLVD
City-State-Zip:	ORLANDO FL 32817

Title	MRG
Name	SENCENBAUGH, BEN
Address	10027 UNIVERSITY BLVD
City-State-Zip:	ORLANDO FL 32817

Title	SECRETARY
Name	KRUPPA, BRIAN
Address	5401 N CENTRAL EXPY, SUITE 300
City-State-Zip:	DALLAS TX 75205

Title	TREASURER
Name	MALDONADO, JOSE B.
Address	5401 N CENTRAL EXPY, SUITE 300
City-State-Zip:	DALLAS TX 75205

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: BRIAN KRUPPA

SECRETARY

04/18/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date