

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000039274

Entity Name: BARBARA A. LUBIN, M.D. LLC

Current Principal Place of Business:

412 WEST 19TH STREET
PANAMA CITY, FL 32405

Current Mailing Address:

412 WEST 19TH STREET
PANAMA CITY, FL 32405 US

FEI Number: 27-0191235

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUBIN, BARBARA A
412 WEST 19TH STREET
PANAMA CITY, FL 32405 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 LUBIN, BARBARA A
Address 412 WEST 19TH STREET
City-State-Zip: PANAMA CITY FL 32405

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: BARBARA A LUBIN

OWNER

03/17/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date