

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000113970

**Entity Name:** MARODYNE MEDICAL, LLC

**Current Principal Place of Business:**

1014 LAKE HOLLINGSWORTH DR  
LAKELAND, FL 33803

**Current Mailing Address:**

1014 LAKE HOLLINGSWORTH DR.  
LAKELAND, FL 33803 US

**FEI Number:** 27-1395334

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VOLAKOS, MARY P  
5710 TANASI CT  
LAKELAND, FL 33812 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:** MARY P VOLAKOS

04/06/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name MCNEILL, LANCE MANAGER  
Address 1014 LAKE HOLLINGSWORTH DR.  
City-State-Zip: LAKELAND FL 33803

*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:** LANCE MCNEILL

MANAGER

04/06/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date