

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000117053

**Entity Name:** 2426 JENKS, LLC

**Current Principal Place of Business:**

2426 JENKS AVENUE  
PANAMA CITY, FL 32405

**Current Mailing Address:**

P.O. BOX 28449  
PANAMA CITY BEACH, FL 32411 US

**FEI Number:** 27-1455371

**Certificate of Status Desired:** No

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

PANAMA CITY PULMONARY, LLC (DR. ANGEL NUNEZ)  
2426 JENKS AVENUE  
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:** ANGEL NUNEZ, MD

04/30/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name NUNEZ, ANGEL DR  
Address 2426 JENKS AVENUE  
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:** ANGEL A NUNEZ

MD

04/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date