

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000055862

Entity Name: TALLAHASSEE NEUROLOGY SPECIALISTS, P.L.

Current Principal Place of Business:

1401 OVEN PARK DR
2ND FLOOR
TALLAHASSEE, FL 32308

Current Mailing Address:

1401 OVEN PARK DR
2ND FLOOR
TALLAHASSEE, FL 32308 US

FEI Number: 27-2466240

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MADIGAN LAW FIRM, P.L.
215 EAST THARPE STREET
TALLAHASSEE, FL 32303 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 JONES, ROLAND P M.D.
Address 401 OVEN PARK DR
2ND FLOOR
City-State-Zip: TALLAHASSEE FL 32308

Title BUSINESS OFFICE MANAGER
Name SIMPSON, VELDA
Address 1401 OVEN PARK DR
2ND FLOOR
City-State-Zip: TALLAHASSEE FL 32308

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: VELDA SIMPSON

BUSINESS OFFICE MGR

04/26/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date