

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000063869

Entity Name: HEALTHNOW FAMILY PRACTICE LLC

Current Principal Place of Business:

2086 GULF TO BAY BLVD
CLEARWATER, FL 33765

Current Mailing Address:

2086 GULF TO BAY BLVD
CLEARWATER, FL 33765 US

FEI Number: 27-2883219

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGING MEMBER
Name NGO, ANTHONY
Address 2086 GULF TO BAY BLVD
City-State-Zip: CLEARWATER FL 33765

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: ANTHONY NGO

DO

01/08/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date