

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000066611

Entity Name: AILEEN DANKO, M.D., LLC

Current Principal Place of Business:

8130 ROYAL PALM BLVD
SUITE 105
CORAL SPRINGS, FL 33065

Current Mailing Address:

8130 ROYAL PALM BLVD
SUITE 105
CORAL SPRINGS, FL 33065 US

FEI Number: 45-2474884

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DANKO, AILEEN
9301 W SAMPLE RD
CORAL SPRINGS, FL 33065 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 DANKO, AILEEN
Address 9301 W SAMPLE RD
City-State-Zip: CORAL SPRINGS FL 33065

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: AILEEN M. DANKO, M.D.

OWNER

03/19/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date