## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000135826

Entity Name: AMS OF GULF BREEZE, LLC

**Current Principal Place of Business:** 

362 GULF BREEZE PARKWAY, SUITE 116

GULF BREEZE, FL 32561

**Current Mailing Address:** 

201 MONTGOMERY AVENUE SARASOTA, FL 34236

FEI Number: 45-3967098 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROSS STREET CORPORATE SERVICES, LLC 200 S. ORANGE AVENUE SARASOTA, FL 34236 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

FILED Mar 28, 2016

**Secretary of State** 

CC4878533573

Authorized Person(s) Detail:

Title MR Title MR

Name DAVID, SIMPSON Name AARON, BARTER

Address 362 GULF BREEZE PARKWAY, SUITE Address 362 GULF BREEZE PARKWAY, SUITE

116

**MGR** 

City-State-Zip: GULF BREEZE FL 32561 City-State-Zip: GULF BREEZE FL 32561

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.

Electronic Signature of Signing Authorized Person(s) Detail