

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000031210

**Entity Name:** NPI OF SOUTH PINELLAS, LLC

**Current Principal Place of Business:**

2325 ULMERTON ROAD SUITE 20  
CLEARWATER, FL 33762

**Current Mailing Address:**

2325 ULMERTON ROAD SUITE 20  
CLEARWATER, FL 33762 UN

**FEI Number:** 45-4696985

**Certificate of Status Desired:** No

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

BULLARD, FRED BIII  
2325 ULMERTON ROAD  
SUITE 20  
CLEARWATER, FL 33762 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                | Title           | MGR, MGRM                      |
| Name            | BULLARD, FRED BIII  | Name            | MICHELLE, BULLARD M            |
| Address         | 2325 ULMERTON ROAD  | Address         | 2325 ULMERTON ROAD<br>SUITE 20 |
| City-State-Zip: | CLEARWATER FL 33762 | City-State-Zip: | CLEARWATER FL 33762            |

*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:** FRED BASCOM BULLARD III

MGRM

01/27/2022

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date