2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000053534

Entity Name: THE INFECTIOUS DISEASES EXPERT GROUP OF NW

FLORIDA, LLC.

Current Principal Place of Business:

9013 UNIVERSITY PKWY SUITE H PENSACOLA, FL 32514

Current Mailing Address:

9013 UNIVERSITY PKWY

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PENSACOLA, FL 32514 US

FEI Number: 45-5096449 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOAN, BAKER 9013 UNIVERSITY PKWY SUITE H PENSACOLA, FL 32514 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: JOAN BAKER 05/31/2015

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **MGRM** Title **MGRM**

EPHTIMIOS, ISSA BAKER, JOAN Name Name

9013 UNIVERSITY PKWY 9013 UNIVERSITY PKWY Address Address

SUITE H SUITE H

PENSACOLA FL 32514 PENSACOLA FL 32514 City-State-Zip: City-State-Zip:

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.

05/31/2015 SIGNATURE: ISSA EPHTIMIOS **OWNER**

FILED May 31, 2015

Secretary of State

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