

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000057255

Entity Name: LUISA GOMEZ MCELROY, M.D., PL

Current Principal Place of Business:

18572 NORTH DALE MABRY HIGHWAY
LUTZ, FL 33548

Current Mailing Address:

18572 NORTH DALE MABRY HIGHWAY
LUTZ, FL 33548 US

FEI Number: 45-5166534

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALKER, GARY
202 S. ROME AVENUE
SUITE 100
TAMPA, FL 33606 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 MGR
Name MCELROY, LUISA GM.D.
Address 18572 NORTH DALE MABRY
HIGHWAY
City-State-Zip: LUTZ FL 33548

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: LUISA GOMEZ MCELROY

MD

04/30/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date