## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000093387

Entity Name: MARY ANN KENNESON, M.D., LLC

**Current Principal Place of Business:** 

9270 HECKSCHER DRIVE JACKSONVILLE, FL 32226

**Current Mailing Address:** 

1895 KINGSLEY AVE, SUITE 801 ORANGE PARK, FL 32073

FEI Number: 46-0607336 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KENNESON, MARY ANN 9270 HECKSCHER DRIVE JACKSONVILLE, FL 32226 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 19, 2014

**Secretary of State** 

CC7074335103

## Authorized Person(s) Detail:

Title MGRM

Name KENNESON, MARY ANN
Address 9270 HECKSCHER DRIVE
City-State-Zip: JACKSONVILLE FL 32226

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: MARY ANN KENNESON

**PRESIDENT** 

03/19/2014