

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000099780

**Entity Name:** F & L MEDICAL OF THE PALM BEACHES LLC

**Current Principal Place of Business:**

3450 NORTHLAKE BLVD  
SUITE 103  
PALM BEACH GARDENS, FL 33403

**Current Mailing Address:**

3450 NORTHLAKE BLVD  
SUITE 103  
PALM BEACH GARDENS, FL 33403 US

**FEI Number:** 90-0880061

**Certificate of Status Desired:** No

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

LUCCA, ANTHONY  
3450 NORTHLAKE BLVD  
SUITE 103  
PALM BEACH GARDENS, FL 33403 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:** ANTHONY LUCCA

03/01/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name LUCCA, ANTHONY  
Address 3450 NORTHLAKE BLVD  
SUITE 103  
City-State-Zip: PALM BEACH GARDENS FL 33403

Title MGRM  
Name FORTUNATO, DANIEL DR.  
Address 3450 NORTHLAKE BLVD  
SUITE 103  
City-State-Zip: PALM BEACH GARDENS FL 33403

*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:** ANTHONY LUCCA

OWNER

03/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date