

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000110459

Entity Name: KATHLEEN T JENKINS MD LLC

Current Principal Place of Business:

7101 35TH LANE EAST
SARASOTA, FL 34243

Current Mailing Address:

7101 35TH LANE EAST
SARASOTA, FL 34243

FEI Number: 46-0921437

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JENKINS, KATHLEEN T
7101 35TH LANE EAST
SARASOTA, FL 34243 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 JENKINS, KATHLEEN TMD
Address 7101 35TH LANE EAST
City-State-Zip: SARASOTA FL 34243

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: KATHLEEN T JENKINS

MANAGER

03/10/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date