

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000143004

Entity Name: GURKIRPAL S. SHERGILL, M.D., LLC

Current Principal Place of Business:

295 PATTERSON ROAD SUITE A
HAINES CITY, FL 33844

Current Mailing Address:

9215 SOUTHERN BREEZE DRIVE
ORLANDO, FL 32836 US

FEI Number: 59-3595579

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GILL, MEENU K
295 PATTERSON ROAD SUITE A
HAINES CITY, FL 33844 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 SHERGILL, GURKIRPAL SMD
Address 295 PATTERSON ROAD SUITE A
City-State-Zip: HAINES CITY FL 33844

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GURKIRPAL SHERGILL

MANAGER

04/29/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date