## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000159382

Entity Name: HEALTH FIRST MEDICAL GROUP, LLC

**Current Principal Place of Business:** 

6450 US HIGHWAY 1 ROCKLEDGE. FL 32955

**Current Mailing Address:** 

6450 US HIGHWAY 1 ROCKLEDGE, FL 32955

FEI Number: 46-1243081 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROMANELLO, NICHOLAS W. ESQ. 6450 US HIGHWAY 1 ROCKLEDGE, FL 32955 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: NICHOLAS W. ROMANELLO 04/30/2018

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title MGRM Title MGR, SECRETARY, TREASURER

NameHEALTH FIRST PHYSICIANS, INC.NameFELKNER, JOSEPH GAddress6450 US HIGHWAY 1Address6450 US HIGHWAY 1City-State-Zip:ROCKLEDGE FL 32955City-State-Zip:ROCKLEDGE FL 32955

Title VP Title ASSISTANT SECRETARY

Name RECTOR, DREW A. Name ROMANELLO, NICHOLAS W. ESQ.

Address 6450 US HIGHWAY 1 Address 6450 US HIGHWAY 1

City-State-Zip: ROCKLEDGE FL 32955 City-State-Zip: ROCKLEDGE FL 32955

Title CEO

Name LETHERBY, FRANK
Address 6450 US HIGHWAY 1
City-State-Zip: ROCKLEDGE FL 32955

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: FRANK LETHERBY

Electronic Signature of Signing Authorized Person(s) Detail

CEO

04/30/2018 Date

FILED Apr 30, 2018

**Secretary of State** 

CC2601080612

Date