## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000149252

Entity Name: BRODRICK ER SVCS PARTNERSHIP, LLC

**FILED** Apr 25, 2016 **Secretary of State** CC1558905555

## **Current Principal Place of Business:**

6200 S. SYRACUSE WAY, STE. 200 GREENWOOD VILLAGE. CO 80111

## **Current Mailing Address:**

6200 S. SYRACUSE WAY, STE. 200 GREENWOOD VILLAGE. CO 80111

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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 **MGRM** Title **MGRM** 

JH GATEWOOD EMERGENCY Name Name GES ACCOUNT MANAGEMENT, INC.

> PHYSICIANS, PA Address

6200 S. SYRACUSE WAY, STE. 200 Address 6200 S. SYRACUSE WAY, STE. 200 GREENWOOD VILLAGE CO 80111 City-State-Zip:

City-State-Zip: GREENWOOD VILLAGE CO 80111

Title PRESIDENT, DIRECTOR Name GATEWOOD, JOSEPH H. MD

Address 6200 S. SYRACUSE WAY, STE. 200 City-State-Zip: GREENWOOD VILLAGE CO 80111

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: JOSEPH H. GATEWOOD, MD

**PRESIDENT** 

04/25/2016