

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000151705

**Entity Name:** KRISTINA M. RAMOS, MSN, ARNP-BC, LLC

**Current Principal Place of Business:**

1938 SOULE ROAD  
CLEARWATER, FL 33759

**Current Mailing Address:**

1938 SOULE ROAD  
CLEARWATER, FL 33759

**FEI Number:** 46-4140237

**Certificate of Status Desired:** Yes

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

GLEASON, WILLIAM P  
5052 ROANOKE ROAD  
HOLIDAY, FL 34690 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 RAMOS, KRISTINA M  
Address 1938 SOULE ROAD  
City-State-Zip: CLEARWATER FL 33759

*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:** KRISTINA M. RAMOS

ARNP

04/07/2016

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date