## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000166192

Entity Name: ANTHONY M WOOLF MD LLC

**Current Principal Place of Business:** 

76 W. SURFSIDE DRIVE SANTA ROSA BEACH FL 32459

**Current Mailing Address:** 

10 PLAYALINDA COURT

SANTA ROSA BEACH FL 32459 US

FEI Number: 46-4189185 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOOLF, ANTHONY MICHAEL 10 PLAYALINDA COURT SANTA ROSA BEACH, FL 32459 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: ANTHONY WOOLF 02/08/2018

Electronic Signature of Registered Agent

Date

FILED Feb 08, 2018

**Secretary of State** 

CC3909219611

Authorized Person(s) Detail:

Title MGR

Name WOOLF, ANTHONY M DR.
Address 76 W. SURFSIDE DRIVE

City-State-Zip: SANTA ROSA BEACH FL 32459

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.

Electronic Signature of Signing Authorized Person(s) Detail