

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000177764

**Entity Name:** ACRC-DERMATOLOGY, LLC

**Current Principal Place of Business:**

1760 N. JOG ROAD,  
SUITE 150  
WEST PALM BEACH, FL 33411

**Current Mailing Address:**

1760 N. JOG ROAD,  
SUITE 150  
WEST PALM BEACH, FL 33411 US

**FEI Number:** 38-3922828

**Certificate of Status Desired:** No

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

DFS AGENT LLC  
1760 N. JOG ROAD,  
SUITE 150  
WEST PALM BEACH, FL 33411 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:** PATRICK DISALVO

02/11/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MEMBER  
Name ATLANTIC CLINICAL RESEARCH  
COLLABORATIVE LLC  
Address 1760 N. JOG ROAD,  
SUITE 150  
City-State-Zip: WEST PALM BEACH FL 33411

Title MGR  
Name WEINSTEIN, DEBRA  
Address 1760 N. JOG ROAD,  
SUITE 150  
City-State-Zip: WEST PALM BEACH FL 33411

Title MGR  
Name AQUA, KEITH  
Address 1760 N. JOG ROAD,  
SUITE 150  
City-State-Zip: WEST PALM BEACH FL 33411

*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:** DEBRA WEINSTEIN

MGR

02/11/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date