

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000018451

Entity Name: STNV MEDICAL DIRECTOR, LLC

Current Principal Place of Business:

1907 HAVEN BND
TAMPA, FL 33613

Current Mailing Address:

1907 HAVEN BND
TAMPA, FL 33613 US

FEI Number: 46-4711503

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BALIGA, RAJENDRA S
1907 HAVEN BND
TAMPA, FL 33613 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
Name BALIGA, RAJENDRA S
Address 1907 HAVEN BND
City-State-Zip: TAMPA FL 33613

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: RAJENDRA BALIGA

MGR

01/14/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date