

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000067610

Entity Name: ELIZABETH COLLIE, ARNP, LLC

Current Principal Place of Business:

9 HEMLOCK CT
OCALA, FL 34472

Current Mailing Address:

9 HEMLOCK CT
OCALA, FL 34472 US

FEI Number: 46-5559576

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLLIE, ELIZABETH
9 HEMLOCK CT
OCALA, FL 34472 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 COLLIE, ELIZABETH
Address 9 HEMLOCK CT
City-State-Zip: Ocala FL 34472

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: ELIZABETH COLLIE

ARNP

03/22/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date