

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000071161

Entity Name: ALGK LAKE CITY, LLC

Current Principal Place of Business:

4423 N.W. 6TH PLACE
SUITE A
GAINESVILLE, FL 32607

Current Mailing Address:

4423 N.W. 6TH PLACE
SUITE A
GAINESVILLE, FL 32607 US

FEI Number: 47-1424453

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALFINO, PAUL A
4423 N.W. 6TH PLACE
GAINESVILLE, FL 32607 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	ALFINO, PAUL A M.D.
Address	4423 N.W. 6TH PLACE SUITE A
City-State-Zip:	GAINESVILLE FL 32607
Title	MGRM
Name	GEORGE, SATHISH K M.D
Address	4423 N.W. 6TH PLACE SUITE A
City-State-Zip:	GAINESVILLE FL 32607

Title	MGRM
Name	LOPEZ-NIETO, CARLOS E M.D.
Address	4423 N.W. 6TH PLACE SUITE A
City-State-Zip:	GAINESVILLE FL 32607
Title	MGRM
Name	KALEEM, AYESHA M.D.
Address	4423 N.W. 6TH PLACE SUITE A
City-State-Zip:	GAINESVILLE FL 32607

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: PAUL ALFINO

MGRM

02/08/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date