

2016 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

FILED
Jan 11, 2016
Secretary of State
CC2845002439

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

MANAGER

01/11/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date