

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000131310

Entity Name: GUY WINZENRIED MD, LLC

Current Principal Place of Business:

2425 TAMIAMI TRAIL N.
210
NAPLES, FL 34103

Current Mailing Address:

2425 TAMIAMI TRAIL N.
210
NAPLES, FL 34103 US

FEI Number: 47-1669580

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VEGA, JOHN G
2666 AIRPORT ROAD SOUTH
NAPLES, FL 34112 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 WINZENRIED, GUY
Address 2425 TAMIAMI TRAIL N.
210
City-State-Zip: NAPLES FL 34103

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: GUY WINZENRIED

MANAGING MEMBER

03/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date