

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000016587

**Entity Name:** WESLEY CHAPEL DERMATOLOGY LLC

**Current Principal Place of Business:**

2336 CRESTOVER LN  
SUITE 101  
WESLEY CHAPEL, FL 33544

**Current Mailing Address:**

2336 CRESTOVER LN  
SUITE 101  
WESLEY CHAPEL, FL 33544 US

**FEI Number:** 47-2964847

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TADICHERLA, PRASAD  
2336 CRESTOVER LN  
SUITE 101  
WESLEY CHAPEL, FL 33544 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 TADICHERLA, SUJATHA  
Address 2336 CRESTOVER LN  
SUITE 101  
City-State-Zip: WESLEY CHAPEL FL 33544

Title MGR  
Name TADICHERLA, PRASAD  
Address 2336 CRESTOVER LN  
SUITE 101  
City-State-Zip: WESLEY CHAPEL FL 33544

*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:** PRASAD TADICHERLA

MGR

03/06/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date