## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000057489

Entity Name: ONE PATIENT SERVICES, LLC

**Current Principal Place of Business:** 

3405 OCEAN DRIVE VERO BEACH. FL 32963

**Current Mailing Address:** 

3405 OCEAN DRIVE VERO BEACH. FL 32963 US

FEI Number: 47-3625891 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONNERY, JOHN C JR 101 E. KENNEDY BLVD STE 3700 TAMPA, FL 33602 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

FILED Mar 01, 2018

**Secretary of State** 

CC3093198873

Authorized Person(s) Detail:

Title AUTHORIZED REPRESENTATIVE

Name BRYANT, WILLIAM V Address 3405 OCEAN DRIVE

City-State-Zip: VERO BEACH FL 32963

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: WILLIAM V BRYANT

**AUTH REP** 

03/01/2018