2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000073802

Entity Name: RIVERWALK ASSOCIATES, LLC

Current Principal Place of Business:

8381 RIVERWALK PARK BLVD. SUITE 101 FORT MYERS, FL 33919

Current Mailing Address:

8381 RIVERWALK PARK BLVD. SUITE 101 FORT MYERS, FL 33919 US

FEI Number: 47-3946849

Name and Address of Current Registered Agent:

SKINNER, SHARI L MD 8381 RIVERWALK PARK BLVD. SUITE 101 FORT MYERS, FL 33919 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:	SHARI L SKINNER, MD			04/26/2024
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGRM	
Name	FRANSWAY, ANTHONY F MD	Name	SKINNER, SHARI L M.D.	
Address	8381 RIVERWALK PARK BLVD.	Address	8381 RIVERWALK PARK BLVD SUITE 101	
City-State-Zip:	FORT MYERS FL 33919	City-State-Zip:	FORT MYERS FL 33919	
Title	MGRM	Title MGRM Name CULLIMO	MGRM	
Name	SCHWARTZ, STANLEY V M.D.		CULLIMORE, KIP C M.D.	
	8381 RIVERWALK PARK BLVD. SUITE 101 FORT MYERS FL 33919	Address	8381 RIVERWALK PARK BLVD SUITE 101	
City-State-Zip:		City-State-Zip:	FORT MYERS FL 33919	
Title	MGRM	Title	MGRM	
Name	IANUELIDIS, LAERTES A M.D. 381 RIVERWALK PARK BLVD. SUITE 101	Name	-	
		Address	BENBENISTY, KEITH M M.D. 8381 RIVERWALK PARK BLVD SUITE 101	
City-State-Zip:	FORT MYERS FL 33919	City-State-Zip:	ip: FORT MYERS FL 33919	
Title	MGRM			
Name	CRATER, SCOTT E M.D.			
	8381 RIVERWALK PARK BLVD. SUITE 101			
City-State-Zip:	FORT MYERS FL 33919			

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.

PRESIDNET

SIGNATURE: SHARI L SKINNER

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 26, 2024 Secretary of State 0258736350CC

Certificate of Status Desired: No

04/26/2024 Date