

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jan 27, 2021
Secretary of State
4807968830CC

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

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FRANSWAY, ANTHONY F 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name FRANSWAY, ANTHONY F MD
Address 8381 RIVERWALK PARK BLVD.
City-State-Zip: FORT MYERS FL 33919

Title MGRM
Name SKINNER, SHARI L M.D.
Address 8381 RIVERWALK PARK BLVD.
SUITE 101
City-State-Zip: FORT MYERS FL 33919

Title MGRM
Name SCHWARTZ, STANLEY V M.D.
Address 8381 RIVERWALK PARK BLVD.
SUITE 101
City-State-Zip: FORT MYERS FL 33919

Title MGRM
Name CULLIMORE, KIP C M.D.
Address 8381 RIVERWALK PARK BLVD.
SUITE 101
City-State-Zip: FORT MYERS FL 33919

Title MGRM
Name MANUELIDIS, LAERTES A M.D.
Address 8381 RIVERWALK PARK BLVD.
SUITE 101
City-State-Zip: FORT MYERS FL 33919

Title MGRM
Name BENBENISTY, KEITH M M.D.
Address 8381 RIVERWALK PARK BLVD.
SUITE 101
City-State-Zip: FORT MYERS FL 33919

Title MGRM
Name CRATER, SCOTT E M.D.
Address 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.

SIGNATURE: ANTHONY F FRANSWAY, MD

REGISTERED AGENT

01/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date