

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000117911

**Entity Name:** GULF COAST MRI LLC

**Current Principal Place of Business:**

116 SOUTH PINELLAS AVENUE  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

116 SOUTH PINELLAS AVENUE  
TARPON SPRINGS, FL 34689 US

**FEI Number:** 47-4524554

**Certificate of Status Desired:** No

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

GLEIS, CHRISTOPHER DR  
116 SOUTH PINELLAS AVENUE  
TARPON SPRINGS, FL 34689 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 GLEIS, CHRISTOPHER  
Address 1723 MAIN STREET  
City-State-Zip: SAFETY HARBOR FL 34695

*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:** CHRISTOPHER GLEIS

MGR

03/13/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date