## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000003249

Entity Name: MICHAEL A. SALVATO, M.D., PLLC

**Current Principal Place of Business:** 

402 SUNSET RD PLANT CITY. FL 33563

**Current Mailing Address:** 

402 SUNSET RD

PLANT CITY. FL 33563 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, KEITH C. ESQ. GRAYROBINSON, PA ONE LAKE MORTON DRIVE LAKELAND, FL 33801 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: KEITH C. SMITH 01/15/2018

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR

Name SALVATO, MICHAEL A

Address 402 SUNSET RD

City-State-Zip: PLANT CITY FL 33563

SIGNATURE: MICHAEL SALVATO

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.

**OWNER** 

Electronic Signature of Signing Authorized Person(s) Detail

01/15/2018

**FILED** Jan 15, 2018

**Secretary of State** 

CC1946857710

Date