## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000025076

Entity Name: FLORIDA ORTHOPEDIC CONSLUTANTS, LLC

**Current Principal Place of Business:** 

4514 SE 14TH ST OCALA, FL 34471

**Current Mailing Address:** 

4514 SE 14TH ST OCALA, FL 34471 US

FEI Number: 81-1330340 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAIER, DOUG I 4514 SE 14TH ST OCALA, FL 34471 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 Jan 13, 2019

**Secretary of State** 

3892053364CC

## Authorized Person(s) Detail:

Title AMBR

Name MAIER, DOUG
Address 4514 SE 14TH ST
City-State-Zip: OCALA FL 34471

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: DOUG MAIER MEMBER 01/13/2019