

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000055564

Entity Name: GAINESVILLE NOCTURNISTS ASSOCIATES, PLLC

Current Principal Place of Business:

2120 HILLCREST STREET
ORLANDO, FL 32803

Current Mailing Address:

2120 HILLCREST STREET
ORLANDO, FL 32803 US

FEI Number: 81-2293460

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NGUYEN, VIETDUNG H DR.
2120 HILLCREST STREET
ORLANDO, FL 32803 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 NGUYEN, VIETDUNG H DR.
Address 2120 HILLCREST STREET
City-State-Zip: ORLANDO FL 32803

Title MGR
Name WILT, JEFFREY A DR.
Address 2120 HILLCREST STREET
City-State-Zip: ORLANDO FL 32803

Title MGR
Name JABBAR, HASEEB R DR.
Address 2120 HILLCREST STREET
City-State-Zip: ORLANDO FL 32803

Title MGR
Name MAYER, IRENE M DR.
Address 2120 HILLCREST STREET
City-State-Zip: ORLANDO FL 32803

Title MGR
Name ADAMS, SAMUEL DR.
Address 2120 HILLCREST STREET
City-State-Zip: ORLANDO FL 32803

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: IRENE M MAYER MD

MGR

04/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date