

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000088442

Entity Name: TRACY MACINTOSH, M.D., L.L.C.

Current Principal Place of Business:

2280 MAIN SAIL CV
KISSIMMEE, FL 34746

Current Mailing Address:

2280 MAIN SAIL CV
KISSIMMEE, FL 34746 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GASSMAN, ALAN S ESQ.
1245 COURT STREET
CLEARWATER, FL 33756 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 MACINTOSH, TRACY M.D.
Address 2280 MAIN SAIL CV
City-State-Zip: KISSIMMEE FL 34746

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: TRACY MACINTOSH, M.D.

MGR

01/10/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date