#### 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000114688

Entity Name: CACERES SPECIALIZED GYNECOLOGY, LLC

**FILED** Mar 15, 2021 **Secretary of State** 9810815906CC

#### **Current Principal Place of Business:**

1136 CYPRESS GLEN CIRCLE KISSIMMEE, FL 34741

### **Current Mailing Address:**

15502 STONEYBROOK WEST PKWY, S SUITE 241 WINTER GARDEN, FL 34787 US

FEI Number: 81-2962500 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

LAW OFFICES OF DAVID H. TREVETT, P.L. 6900 TAVISTOCK LAKES BLVD SUITE 400 ORLANDO, FL 32827 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

CACERES, AILEEN MD Name

117 W. UNDERWOOD STREET Address

City-State-Zip: ORLANDO FL 32806

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail