

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000114688

Entity Name: CACERES SPECIALIZED GYNECOLOGY, LLC

Current Principal Place of Business:

1136 CYPRESS GLEN CIRCLE
KISSIMMEE, FL 34741

Current Mailing Address:

1136 CYPRESS GLEN CIRCLE
KISSIMMEE, FL 34741 US

FEI Number: 81-2962500

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAW OFFICES OF DAVID H. TREVETT PL
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: DAVID TREVETT

02/12/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name CACERES, AILEEN MD
Address 1136 CYPRESS GLEN CIRCLE
City-State-Zip: KISSIMMEE FL 34741

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: AILEEN CACERES

MGR

02/12/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date