

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000120162

Entity Name: CENTRAL FLORIDA BONE AND JOINT INSTITUTE, PLLC

Current Principal Place of Business:

700 W MORSE BLVD
SUITE 201
WINTER PARK, FL 32789

Current Mailing Address:

700 W MORSE BLVD
SUITE 201
WINTER PARK, FL 32789 US

FEI Number: 81-3079240

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATTHIAS & MATTHIAS, PL
700 W. MORSE BLVD.
SUITE 201
WINTER PARK, FL 32789 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 LEUNG, BRIAN C
Address 2091 ALAQUA LAKES BLVD
City-State-Zip: LONGWOOD FL 32779

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: BRIAN LEUNG

MANAGER

02/06/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date