

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000129124

Entity Name: TOTAL VITALITY MEDICAL OF SUN CITY LLC

Current Principal Place of Business:

827 CYPRESS VILLAGE BLVD.
RUSKIN, FL 33573

Current Mailing Address:

827 CYPRESS VILLAGE BLVD.
RUSKIN, FL 33573

FEI Number: 81-3300767

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOLSTEIN, BRIAN G
24945 US HIGHWAY 19 NORTH
CLEARWATER, FL 33763 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 WOLSTEIN, BRIAN G
Address 24945 US HIGHWAY NORTH
City-State-Zip: CLEARWATER FL 33763

Title MBR
Name NIXON, ALICIA A
Address 827 CYPRESS VILLAGE BLVD.
City-State-Zip: RUSKIN FL 33573

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 G WOLSTEIN

OWNER

04/05/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date