

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000226397

Entity Name: GOOLSBY'S CLINICAL SERVICES, LLC

Current Principal Place of Business:

2720 PARK STREET SUITE 202
JACKSONVILLE, FL 32205

Current Mailing Address:

9233 REDTAIL DRIVE
JACKSONVILLE, FL 32222 US

FEI Number: 81-5224967

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOOLSBY, TIFFANY K
9233 REDTAIL DRIVE
JACKSONVILLE, FL 32222 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: TIFFANY KELLER GOOLSBY

04/29/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name GOOLSBY, KEVIN G
Address 9233 REDTAIL DRIVE
City-State-Zip: JACKSONVILLE FL 32222

Title AMBR
Name GOOLSBY, TIFFANY K
Address 9233 REDTAIL DRIVE
City-State-Zip: JACKSONVILLE FL 32222

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: KEVIN GOOLSBY

OWNER

04/29/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date