

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000009630

**Entity Name:** LEMON BAY ANIMAL HOSPITAL, LLC

**Current Principal Place of Business:**

3060 S. MCCALL RD  
ENGLEWOOD, FL 34224

**Current Mailing Address:**

3060 S. MCCALL RD  
ENGLEWOOD, FL 34224

**FEI Number:** 65-0783111

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BOOKS, CINDY A  
3060 S. MCCALL RD.  
ENGLEWOOD, FL 34224 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:** CINDY BOOKS

02/03/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MMGR  
Name GURLAND, JONATHAN  
Address 745 CRESTWOOD RD  
City-State-Zip: ENGLEWOOD FL 34223

Title MGR  
Name BOOKS, CINDY A  
Address 745 CRESTWOOD RD  
City-State-Zip: ENGLEWOOD FL 34223

*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:** JONATHAN GURLAND

MMGR

02/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date