2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 02, 2020
Secretary of State
5618054857CC

DOCUMENT# L17000012736

Entity Name: PLANT CITY MEDICAL GROUP, LLC

Current Principal Place of Business:

2041 N. WHEELER STREET
SUITE 100
PLANT CITY, FL 33563

Current Mailing Address:

2041 N. WHEELER STREET
SUITE 100
PLANT CITY, FL 33563 US

FEI Number: 81-5162750

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HATTON, DAVID
2960 WENTWORTH
WESTON, FL 33332 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	Title	MGR
Name	HATTON, DAVID	Name	JONAS, GARRY
Address	600 WEST HILLSBORO BLVD SUITE 300	Address	600 WEST HILLSBORO BLVD SUITE 350
City-State-Zip:	DEERFIELD BEACH FL 33441	City-State-Zip:	DEERFIELD BEACH FL 33441

Title	MGR
Name	MODIST, SCOTT
Address	600 WEST HILLSBORO BLVD SUITE 350
City-State-Zip:	DEERFIELD BEACH FL 33441

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: SCOTT MODIST MGR 03/02/2020

Electronic Signature of Signing Authorized Person(s) Detail — Date