

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000018630

Entity Name: FLORIDA MEDICAL SCHOOL LLC

Current Principal Place of Business:

1755 OLIVE STREET
LAKELAND, FL 33815

Current Mailing Address:

1755 OLIVE STREET
LAKELAND, FL 33815 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JORDAN, MARK F
1755 OLIVE STREET
LAKELAND, FL 33815 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: MARK F. JORDAN

04/26/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CEO
Name JORDAN, MARK F.
Address 1755 OLIVE STREET
City-State-Zip: LAKELAND FL 33815

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: MARK F. JORDAN

CEO

04/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date