

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000051421

**Entity Name:** NORTH BAY SPINE AND REHAB, LLC

**Current Principal Place of Business:**

2431 BRUNELLO TRACE  
LUTZ, FL 33558

**Current Mailing Address:**

2431 BRUNELLO TRACE  
LUTZ, FL 33558 US

**FEI Number: 82-0749975**

**Certificate of Status Desired: No**

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

BOWSER, BRETT R  
2431 BRUNELLO TRACE  
LUTZ, FL 33558 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	BOWSER, BRETT R	Name	BOWSER, JENNIFER M
Address	2431 BRUNELLO TRACE	Address	2431 BRUNELLO TRACE
City-State-Zip:	LUTZ FL 33558	City-State-Zip:	LUTZ FL 33558

*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: BRETT BOWSER**

**MANAGER**

**02/09/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date