2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2019
Secretary of State
9049561143CC

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Entity Name: TREASURE COAST ADVANCED PRACTICE NURSES LLC

Current Principal Place of Business:

1701 S.E. HILLMOOR DR
STE 8
PORT ST. LUCIE, FL 34952

Current Mailing Address:

1701 S.E. HILLMOOR DR
STE 8
PORT ST. LUCIE, FL 34952 US

FEI Number: 82-4161032

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, AMY
1701 S.E. HILLMOOR DR
STE 8
PORT ST. LUCIE, FL 34952 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: AMY WILSON 02/15/2019

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	AMBR
Name	WILSON, AMY
Address	1701 S.E. HILLMOOR DR STE 8
City-State-Zip:	PORT ST. LUCIE FL 34952

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: AMY WILSON AMBR 02/15/2019

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