

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000037459

Entity Name: EDGEWATER MEDICAL GROUP LLC

Current Principal Place of Business:

506 NORTH RIDGEWOOD AVENUE
EDGEWATER, FL 32132

Current Mailing Address:

506 NORTH RIDGEWOOD AVENUE
EDGEWATER, FL 32132 US

FEI Number: 82-4426938

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOHANNON, KENNETH ESQUIRE
221 N. CAUSEWAY, STE A
NEW SMYRNA BEACH, FL 32169 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 AMBR
Name HUGHES, ANDREA K
Address 506 NORTH RIDGEWOOD AVENUE
City-State-Zip: EDGEWATER FL 32132

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: ANDREA KELLY HUGHES, ARNP

OWNER

07/01/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date