

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000044851

Entity Name: KPW HEALTH LLC

Current Principal Place of Business:

505 GILMAN CT N
ST PETERSBURG, FL 33716

Current Mailing Address:

505 GILMAN CT N
ST PETERSBURG, FL 33716

FEI Number: 82-4467054

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WESTON, KHALILAH M MD
995 16TH ST N
SAINT PETERSBURG, FL 33705 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
Name WESTON, KHALILAH M MD
Address 505 GILMAN CT N
City-State-Zip: ST PETERSBURG FL 33716

Title MGR
Name WESTON, PATRICK S MD
Address 505 GILMAN CT N
City-State-Zip: ST PETERSBURG FL 33716

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: KHALILAH WESTON, MD

OWNER

04/01/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date