

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000142297

**Entity Name:** MEDICAL PARTNERS OF FLORIDA, LLC

**Current Principal Place of Business:**

8043 SPYGLASS HILL RD  
SUITE 102  
MELBOURNE, FL 32940

**Current Mailing Address:**

8043 SPYGLASS HILL RD  
SUITE 102  
MELBOURNE, FL 32940 US

**FEI Number:** 83-0853390

**Certificate of Status Desired:** No

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

BUBBERS, BILL  
380 N. COURTNEY PKWY  
MERRITT ISLAND, FL 32953 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:** BILL BUBBERS

02/19/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name SCHRUMPF, TANYA  
Address 8043 SPYGLASS HILL RD  
SUITE 102  
City-State-Zip: MELBOURNE FL 32940

*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:** TANYA SCHRUMPF

MGR

02/19/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date