

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000257460

**Entity Name:** SHILOH SIMMONS, APRN, LLC

**Current Principal Place of Business:**

5668 JOSEPH ROAD  
PANAMA CITY, FL 32404

**Current Mailing Address:**

5668 JOSEPH ROAD  
PANAMA CITY, FL 32404

**FEI Number:** 84-3523178

**Certificate of Status Desired:** Yes

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

SIMMONS, SHILOH L  
5668 JOSEPH ROAD  
PANAMA CITY, FL 32404 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 SIMMONS, SHILOH  
Address 5668 JOSEPH ROAD  
City-State-Zip: PANAMA CITY FL 32404

*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:** SHILOH L SIMMONS

OWNER

04/27/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date