## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000107385

**Entity Name: BC MEDICAL ENTERPRISES PLLC** 

**Current Principal Place of Business:** 

1714 SW 17TH STREET OCALA, FL 34471

**Current Mailing Address:** 

1714 SW 17TH STREET OCALA, FL 34471 US

FEI Number: 85-0805121 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

M. SCRIBNER, CPA, P.A. 307 NE 36TH AVENUE OCALA, FL 34470 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: MARY SCRIBNER 04/30/2024

Electronic Signature of Registered Agent

Date

FILED Apr 30, 2024

**Secretary of State** 

7340812651CC

## Authorized Person(s) Detail:

Title AMBR

Name CARTER, BRENT
Address 5940 N. BONVIEW PT.

SIGNATURE: BRENT CARTER

City-State-Zip: CITRUS SPRINGS FL 34434

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.

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