

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000013895

**Entity Name:** KCP ANESTHESIA, LLC

**Current Principal Place of Business:**

13770 OLD LIVINGSTON RD  
NAPLES, FL 34109

**Current Mailing Address:**

13770 OLD LIVINGSTON RD  
NAPLES, FL 34109 US

**FEI Number:** 87-4403008

**Certificate of Status Desired:** No

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

PANEPINTO, CASEY  
13770 OLD LIVINGSTON RD  
NAPLES, FL 34109 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:** CASEY PANEPINTO

04/15/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            CEO  
Name            PANEPINTO, CASEY A  
Address        13770 OLD LIVINGSTON RD  
City-State-Zip: NAPLES FL 34109

*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:** CASEY PANEPINTO

CEO

04/15/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date