

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000201438

**Entity Name:** ANKIT CHANDER MD, PLLC

**Current Principal Place of Business:**

3250 CYPRESS GLEN WAY  
#422  
NAPLES, FL 34109

**Current Mailing Address:**

3250 CYPRESS GLEN WAY  
#422  
NAPLES, FL 34109 US

**FEI Number:** 88-2328962

**Certificate of Status Desired:** Yes

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

CHANDER, ANKIT ROY  
3250 CYPRESS GLEN WAY  
#422  
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:** ANKIT CHANDER

03/02/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name CHANDER, ANKIT ROY DR.  
Address 3250 CYPRESS GLEN WAY  
#422  
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:** ANKIT R CHANDER

MD

03/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date