2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2025
Secretary of State
7666430721CC

DOCUMENT# L22000487163

Entity Name: JOHNSONS FAMILY MEDICINE LLC

Current Principal Place of Business:

2605 THOMAS DRIVE
SUITE 120
PANAMA CITY BEACH, FL 32408

Current Mailing Address:

2605 THOMAS DRIVE
SUITE 120
PANAMA CITY BEACH, FL 32408 US

FEI Number: 92-1074632

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHNSONS FAMILY MEDICINE
2605 THOMAS DRIVE
SUITE 120
PANAMA CITY BEACH, FL 32408 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: STEPHEN JOHNSON 05/04/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	AMBR
Name	JOHNSON, STEPHEN
Address	313 WILLOW WAY
City-State-Zip:	LYNN HAVEN FL 32444

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: STEPHEN JOHNSON OWNER 05/04/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date