2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2025
Secretary of State
6607610082CC

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Entity Name: CLINICAL HEALTH SERVICES, INC.

Current Principal Place of Business:

5129 W. IDLEWILD AVE
TAMPA, FL 33634

Current Mailing Address:

PO BOX 151375
TAMPA, FL 33684 US

FEI Number: 59-3394292

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LENOIR, JOHN J
4923 W. MELROSE AVE SOUTH
TAMPA, FL 33629 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

Officer/Director Detail :

Title	P
Name	LENOIR, JOHN J
Address	4923 W. MELROSE AVE SOUTH
City-State-Zip:	TAMPA FL 33629

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN LENOIR PRESIDENT 01/08/2025

Electronic Signature of Signing Officer/Director Detail — Date