

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000058824

Entity Name: PHYSICIANS WEALTH CARE LLC.

Current Principal Place of Business:

10706 ST ANDREWS ROAD
BOYNTON BEACH, FL 33436

Current Mailing Address:

10706 ST ANDREWS ROAD
BOYNTON BEACH, FL 33436 US

FEI Number: 20-1472964

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAASS, EDWARD H
10706 ST ANDREWS ROAD
BOYNTON BEACH, FL 33436 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

Authorized Person(s) Detail :

Title MGR
Name MAASS, EDWARD H
Address 10706 ST ANDREWS ROAD
City-State-Zip: BOYNTON BEACH FL 33436

Title MGR
Name MAASS, DEBORAH A
Address 10706 ST ANDREWS ROAD
City-State-Zip: BOYNTON BEACH FL 33436

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: EDWARD H MAASS

PRES

04/23/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date