2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000062330

Entity Name: CLEARWATER PAIN MANAGEMENT ASSOCIATES DIVISION,

LLC

Current Principal Place of Business:

1A BURTON HILLS BOULEVARD NASHVILLE, TN 37215

Current Mailing Address:

1A BURTON HILLS BOULEVARD NASHVILLE, TN 37215 US

FEI Number: 45-2660987 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 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: JILLIAN MARCUS 04/24/2022

> Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

MANAGER, PRESIDENT Title **TREASURER**

Name CHUANG MD, CHAN-CHOU Name CHARPENTIER, JASON

Address 1A BURTON HILLS BOULEVARD Address 1A BURTON HILLS BOULEVARD

NASHVILLE TN 37215 City-State-Zip: NASHVILLE TN 37215 City-State-Zip:

SENIOR VICE PRESIDENT AND Title Title

SECRETARY Name

MUSSO, MATTHEW Name MOORE, ILENE

Address 1A BURTON HILLS BOULEVARD 1A BURTON HILLS BOULEVARD Address

City-State-Zip: NASHVILLE TN 37215 NASHVILLE TN 37215 City-State-Zip:

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: ILENE MOORE

Electronic Signature of Signing Authorized Person(s) Detail

04/24/2022 **SECRETARY**

FILED Apr 24, 2022

Secretary of State

8100336370CC

Date