

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000091622

Entity Name: MEDICUS SELECT, L.L.C.

Current Principal Place of Business:

1401 CENTERVILLE RD
STE 210
TALLAHASSEE, FL 32308

Current Mailing Address:

1401 CENTERVILLE RD
STE 210
TALLAHASSEE, FL 32308 US

FEI Number: 45-2980304

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DAVIS, JUDY
1300 MICCOSUKEE RD
TALLAHASSEE, FL 32308 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 MGRM
Name TALLAHASSEE MEMORIAL HEALTHCARE, INC.
Address 1401 CENTERVILLE ROAD, SUITE 210
City-State-Zip: TALLAHASSEE FL 32308

Title CEO
Name O'BRYANT, MARK
Address 1401 CENTERVILLE ROAD, SUITE 210
City-State-Zip: TALLAHASSEE FL 32308

Title CFO
Name NEEDHAM, PRISCILLA
Address 1401 CENTERVILLE RD STE 210
City-State-Zip: TALLAHASSEE FL 32308

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: PRISCILLA NEEDHAM

CFO

03/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date