FEI Number: 38-3876436			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
HUDSON, BRIA 3619 KIESSEL THE VILLAGES				
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	STEVEN M. ROY			03/02/2023
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MANAGER	Title	PRESIDENT	
Name	THE VILLAGES HEALTH HOLDING COMPANY, LLC 3619 KIESSEL ROAD	Name	SUSSMAN, ELLIOT	
		Address	3619 KIESSEL ROAD	
Address		City-State-Zip:	THE VILLAGES FL 32162	
City-State-Zip:	THE VILLAGES FL 32162	<i>y</i>		
Title	CEO	Title	Т	
		Nomo		

Name

Address

City-State-Zip:

STOFF, KENNETH D

3619 KIESSEL ROAD

THE VILLAGES FL 32162

3619 KIESSEL ROAD

Nar

Name

Address

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: TRINH, BOBBY

CEO

03/02/2023

TRINH, BOBBY

3619 KIESSEL ROAD

THE VILLAGES FL 32162

3619 KIESSEL ROAD

Entity Name: THE VILLAGES HEALTH SYSTEM, LLC

Current Principal Place of Business:

THE VILLAGES, FL 32163

Current Mailing Address:

THE VILLAGES. FL 32163 US

FEI

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L12000066182

FILED Mar 02, 2023 Secretary of State 9433165882CC

Electronic Signature of Signing Authorized Person(s) Detail

Date