

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000153678

Entity Name: BROWARD OUTPATIENT ACQUISITIONS, LLC

Current Principal Place of Business:

150 SOUTH ANDREWS AVENUE, SUITE 440
POMPANO BEACH, FL 33069

Current Mailing Address:

PO BOX 50010
LIGHTHOUSE POINT, FL 33074 US

FEI Number: 46-1573540

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: DONNA MOCH

04/25/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name CASTROVINCI, STACEY
Address PO BOX 50010
City-State-Zip: LIGHTHOUSE POINT FL 33074

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: STACEY CASTROVINCI

MANAGER

04/25/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date