## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000115041

Entity Name: SUNSPIRE HEALTH FLORIDA, LLC

**Current Principal Place of Business:** 

215 W. VERNE STREET

SUITE B

TAMPA, FL 33606

**Current Mailing Address:** 

600 W. HILLSBORO BLVD

300

DEERFIELD BEACH, FL 33441 US

FEI Number: 46-3424864 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HATTON, DAVID 2960 WENTWORTH WESTON, FL 33332 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: DAVID L. HATTON 01/14/2021

**Electronic Signature of Registered Agent** 

Date

FILED Jan 14, 2021

**Secretary of State** 

6994385249CC

Authorized Person(s) Detail:

Title MGR Title MGR

Name MODIST, SCOTT Name JONAS, GARRY

Address 600 W. HILLSBORO BLVD Address 600 W. HILLSBORO BLVD

City-State-Zip: DEERFIELD BEACH FL 33441 City-State-Zip: DEERFIELD BEACH FL 33441

Title MGR

Name HATTON, DAVID

Address 600 W. HILLSBORO BLVD

300

City-State-Zip: DEERFIELD BEACH FL 33441

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: SCOTT MODIST MGR 01/14/2021