2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 02, 2018
Secretary of State
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Entity Name: NORTH FLORIDA SURGEONS BAPTIST JACKSONVILLE, LLC

Current Principal Place of Business:

836 PRUDENTIAL DR, #1001
JACKSONVILLE, FL 32207

Current Mailing Address:

11945 SAN JOSE BOULEVARD, BLDG 300
JACKSONVILLE, FL 32223

FEI Number: 46-4328739

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BERLIN, JOHN
11945 SAN JOSE BOULEVARD, BLDG 300
JACKSONVILLE, FL 32223 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	MGR
Name	NORTH FLORIDA SURGEONS, P.A.
Address	11945 SAN JOSE BOULEVARD, BLDG 300
City-State-Zip:	JACKSONVILLE FL 32223

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: JOHN BERLIN REGISTERED AGENT 02/02/2018

Electronic Signature of Signing Authorized Person(s) Detail — Date