

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000096876

Entity Name: SANTURCE MEDICAL CENTER, LLC

Current Principal Place of Business:

500 VONDERBURG DR
SUITE 305E
BRANDON, FL 33511

Current Mailing Address:

500 VONDERBURG DR
SUITE 305E
BRANDON, FL 33511 US

FEI Number: 81-2879464

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, ALVARO E
405 SOUTH DALE MABRY HWY
SUITE 102
TAMPA, FL 33609 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 CEO
Name MIELES, ORLANDO E.
Address 405 SOUTH DALE MABRY HWY
SUITE 102
City-State-Zip: TAMPA FL 33609

Title AMBR
Name CONFER, OMAIDA
Address 500 VONDERBURG DR
SUITE 305E
City-State-Zip: BRANDON FL 33511

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: OMAIDA CONFER

AMBR

03/31/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date