## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000038959

Entity Name: HEALTHTECH SYSTEMS, LLC

**Current Principal Place of Business:** 

100 E PINE ST STE 110

ORLANDO, FL 32801

## **Current Mailing Address:**

100 E PINE ST SUITE 110 ORLANDO, FL 32801 US

FEI Number: 82-4444978 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

FUREY, JOHN-PAUL 100 E PINE ST SUITE 110 ORLANDO, FL 32801 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

**FILED** Apr 30, 2024

**Secretary of State** 

1752099820CC

Authorized Person(s) Detail:

AMBR, CEO, CHAIRMAN Title Title **AUTHORIZED REPRESENTATIVE** 

FUREY. JOHN-PAUL FUREY. PAUL Name Name

Address 100 E PINE ST Address 2617 SUMMERFIELD RD

STE 110 City-State-Zip:

ORLANDO FL 32792 ORLANDO FL 32801 City-State-Zip:

**AUTHORIZED MEMBER** Title Name GEORGE, CHRISTOPHER

Address 100 E PINE ST

**STE 110** 

ORLANDO FL 32801 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: JOHN-PAUL FUREY

OWNER/OPERATOR

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date