

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000119074

**Entity Name:** APOGEE HEALTH MANAGEMENT, LLC

**Current Principal Place of Business:**

1430 S DIXIE HIGHWAY  
SUITE 304  
CORAL GABLES, FL 33146

**Current Mailing Address:**

1430 S DIXIE HIGHWAY  
SUITE 304  
CORAL GABLES, FL 33146 US

**FEI Number:** 83-4601586

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PRICE, MARK  
1430 S DIXIE HIGHWAY  
SUITE 304  
CORAL GABLES, FL 33146 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:** MARK PRICE

04/05/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name HEALTHCARE CAPITAL GROUP, LLC  
Address 999 PONCE DE LEON BLVD., STE 650  
City-State-Zip: CORAL GABLES FL 33134

*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:** MARK PRICE

MANAGER

04/05/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date