

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000435309

Entity Name: HIGHTOWER DERMATOLOGY SERVICES, LLC

Current Principal Place of Business:

957 E. DEL WEBB BLVD., STE. 101
SUN CITY CENTER, FL 33573

Current Mailing Address:

957 E. DEL WEBB BLVD., STE. 101
SUN CITY CENTER, FL 33573 US

FEI Number: 26-4651127

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HIGHTOWER, KORTNEY D
916 N NEWPORT AVE
TAMPA, FL 33606 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 HIGHTOWER, KORTNEY D
Address 916 N NEWPORT AVE
City-State-Zip: TAMPA FL 33606

Title MGR
Name HIGHTOWER, AMY N
Address 906 N GILCHRIST AVE
City-State-Zip: TAMPA FL 33606

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: KORTNEY HIGHTOWER, MD

MD/PRESIDENT

01/03/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date