

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000128761

Entity Name: ACE PRIMARY CARE LLC

Current Principal Place of Business:

1407 EAST ALLEGRIE DRIVE
INVERNESS, FL 34453

Current Mailing Address:

1407 EAST ALLEGRIE DRIVE
INVERNESS, FL 34453 US

FEI Number: 92-3042097

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CO, ALISTAIR W
1407 E ALLEGRIE DRIVE
INVERNESS, FL 34453 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	Title	AMBR
Name	CO, GLORICEL F	Name	CO, ALISTAIR W
Address	1407 E ALLEGRIE DR	Address	1407 E ALLEGRIE DR
City-State-Zip:	INVERNESS FL 34453	City-State-Zip:	INVERNESS FL 34453

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: ALISTAIR CO

OWNER/AMBR

01/31/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date