

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000520528

Entity Name: MANA HEALTH PARTNERS MANAGEMENT, LLC

Current Principal Place of Business:

1317 EDGEWATER DR
1470
ORLANDO, FL 32804

Current Mailing Address:

1317 EDGEWATER DR
1470
ORLANDO, FL 32804

FEI Number: 93-4530193

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHWARZ, MITCH
1317 EDGEWATER DR
1470
ORLANDO, FL 32804 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 SCHWARZ, MITCH
Address 1317 EDGEWATER DR 1470
City-State-Zip: ORLANDO FL 32804

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: MITCH SCHWARZ

MANAGER

02/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date