

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000242144

Entity Name: ACUTE CARE PARTNERS LLC

Current Principal Place of Business:

5471 SPRING HILL DRIVE
SPRING HILL, FL 34606

Current Mailing Address:

5471 SPRING HILL DRIVE
SPRING HILL, FL 34606 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOODRUFF, RANDALL
5471 SPRING HILL DRIVE
SPRING HILL, FL 34606 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 CARDONA, FARRAH
Address 5471 SPRING HILL DR
City-State-Zip: SPRING HILL FL 34606

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: FARRAH CARDONA

MGR

05/01/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date