

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M03000002646

**Entity Name:** ADVANCED MEDICAL SERVICES, LLC

**Current Principal Place of Business:**

2999 PALM HARBOR BOULEVARD  
SUITE B  
PALM HARBOR, FL 34683

**Current Mailing Address:**

P.O. BOX 1685  
PALM HARBOR, FL 34682

**FEI Number:** 62-1706721

**Certificate of Status Desired:** No

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

ANDERSON, DAMIAN K.  
2999 PALM HARBOR BOULEVARD  
SUITE B  
PALM HARBOR, FL 34683 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:** DAMIAN K. ANDERSON

02/22/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name LONG, VIRGINIA C.E.O  
Address 2999 PALM HARBOR BOULEVARD,  
STE. B  
City-State-Zip: PALM HARBOR FL 34683

Title MGRM  
Name ANDERSON, DAMIAN K C.O.O.  
Address 2999 PALM HARBOR BOULEVARD,  
STE.B  
City-State-Zip: PALM HARBOR FL 34683

*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:** DAMIAN ANDERSON

C.O.O.

02/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date