

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000001169

**Entity Name:** NATIONAL URGENT CARE HOLDINGS, INC.**Current Principal Place of Business:**115 EAST PARK DRIVE  
300  
BRENTWOOD, TN 37027**Current Mailing Address:**115 EAST PARK DRIVE  
300  
BRENTWOOD, TN 37027 US**FEI Number:** 45-4805957**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**Officer/Director Detail :**

Title	DIRECTOR
Name	GOLINKIN, WEBSTER F.
Address	115 EAST PARK DRIVE 300
City-State-Zip:	BRENTWOOD TN 37027

Title	CEO/ P
Name	GOLINKIN, WEBSTER F
Address	115 EAST PARK DRIVE 300
City-State-Zip:	BRENTWOOD TN 37027

Title	S
Name	KAM, LAURA
Address	115 EAST PARK DRIVE 300
City-State-Zip:	BRENTWOOD TN 37027

Title	CFO/ T
Name	MURPHY, DANIEL
Address	115 EAST PARK DRIVE 300
City-State-Zip:	BRENTWOOD TN 37027

Title	COO
Name	BARRERA, DANIELLE
Address	115 EAST PARK DRIVE 300
City-State-Zip:	BRENTWOOD TN 37027

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LAURA KAM**SECRETARY****01/26/2022**

Electronic Signature of Signing Officer/Director Detail

Date