

2024 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A00000001629

Entity Name: FIVE POINTS HEALTH CARE, LTD.

Current Principal Place of Business:

2380 SADLER ROAD
SUITE 201
FERNADINA BEACH, FL 32034

Current Mailing Address:

P.O. BOX 15369
FERNADINA BEACH, FL 32035 US

FEI Number: 59-3686144

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, CHARLES
2380 SADLER ROAD
SUITE 201
FERNANDINA BEACH, FL 32034 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: CHARLES WILSON

02/08/2024

Electronic Signature of Registered Agent

Date

General Partner Detail :

Document # P00000101309
Name FIVE POINTS MANAGERS, INC.
Address 2380 SADLER ROAD, SUITE 201
City-State-Zip: FERNADINA BEACH FL 32034

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVEN W SELL

P

02/08/2024

Electronic Signature of Signing General Partner Detail

Date