

2018 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A07000001101

Entity Name: PRESTIGE HEALTH CAPITAL PARTNERS LLLP

Current Principal Place of Business:

6321 DANIELS PKWY
STE 200
FORT MYERS, FL 33912

Current Mailing Address:

6321 DANIELS PKWY
SUITE 200
FT MYERS, FL 33912 US

FEI Number: 41-2252773

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOX, BRIAN
6321 DANIELS PKWY
SUITE 200
FT MYERS, FL 33912 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

General Partner Detail :

Document #

Name FOX, BRIAN

Address 6321 DANIELS PKWY
SUITE 200

City-State-Zip: FT MYERS FL 33912

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: BRIAN FOX

GEN PARTNER

03/28/2018

Electronic Signature of Signing General Partner Detail

Date