

**2023 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A97000001254

**Entity Name:** PSHS ALPHA PARTNERS, LTD.

**Current Principal Place of Business:**

7408 LAKE WORTH ROAD  
SUITE 900  
LAKE WORTH, FL 33467

**Current Mailing Address:**

340 SEVEN SPRINGS WAY  
SUITE 600  
BRENTWOOD, TN 37027 US

**FEI Number:** 65-0793962

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 # L07000067461  
Name SURGERY PARTNERS OF LAKE  
WORTH, LLC  
Address 340 SEVEN SPRINGS WAY  
SUITE 600  
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 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:** JENNIFER BALDOCK

**AUTHORIZED PERSON**

**04/24/2023**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date