2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2025
Secretary of State
7780849390CC

DOCUMENT# N97000005902

Entity Name: JOHNS HOPKINS ALL CHILDREN'S URGENT CARE, INC.

Current Principal Place of Business:

501 6TH AVE S
ST PETERSBURG, FL 33701

Current Mailing Address:

501 6TH AVE S
ST PETERSBURG, FL 33701 US

FEI Number: 59-3476049

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

Officer/Director Detail :

Title	PTR
Name	SCHULHOF, ALICIA
Address	501 6TH AVE S
City-State-Zip:	ST PETERSBURG FL 33701

Title	TRCFO
Name	ROGERS, SHERRON
Address	501 6TH AVE S
City-State-Zip:	ST PETERSBURG FL 33701

Title	TR
Name	NAWAB, URSULA
Address	501 6TH AVE S
City-State-Zip:	ST PETERSBURG FL 33701

Title	TR
Name	MACOGAY, MELISSA
Address	501 6TH AVE S
City-State-Zip:	ST PETERSBURG FL 33701

Title	VTR
Name	PERNO, JOSEPH DR.
Address	501 6TH AVE S
City-State-Zip:	ST PETERSBURG FL 33701

Title	VTR
Name	OLSEN, JUSTIN
Address	501 6TH AVE S
City-State-Zip:	ST PETERSBURG FL 33701

Title	TR
Name	DANIELSON, PAUL
Address	501 6TH AVE S
City-State-Zip:	ST PETERSBURG FL 33701

Title	S
Name	WILLIAMS, VICKIE
Address	501 6TH AVE S
City-State-Zip:	ST PETERSBURG FL 33701

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHERRON ROGERS CFO 02/19/2025

Electronic Signature of Signing Officer/Director Detail — Date