<b>20205389920CC</b>				
Current Prir	ncipal Place of Business:			
400 HEALTH P				
SAINT AUGUS	TINE, FL 32086			
Current Mai	ling Address:			
400 HEALTH	I PARK BLVD.			
SAINT AUG	USTINE, FL 32086 US			
FEI Number: 36-4860252			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
SCOTT, CARO 100 WHETSTO				
SUITE 203				
ST. AUGUSTIN	E, FL 32086 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	E: CAROLYN SCOTT			04/11/2024
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	DIRECTOR	Title	DIRECTOR	
Name	BATENHORST, TODD J DR.	Name	GAY, DAVID DR.	
Address	400 HEALTH PARK BLVD.	Address	400 HEALTH PARK BLVD.	
City-State-Zip:	SAINT AUGUSTINE FL 32086	City-State-Zip:	SAINT AUGUSTINE FL 32086	
Title	DIRECTOR	Title	DIRECTOR	
Name	BRADY, KAYLAN DR.	Name	MAREMA, ROBERT DR.	
Address	400 HEALTH PARK BLVD.	Address	400 HEALTH PARK BLVD.	
City-State-Zip:	SAINT AUGUSTINE FL 32086	City-State-Zip:	SAINT AUGUSTINE FL 32086	
Title	DIRECTOR, PRESIDENT	Title	DIRECTOR	
Name	DEVOOGHT, CARLTON	Name	WAGNER, DONNA	
Address	400 HEALTH PARK BLVD.	Address	400 HEALTH PARK BLVD.	
City-State-Zip:		City-State-Zip:	SAINT AUGUSTINE FL 32086	
Sity State Lip.				
Title	DIRECTOR, SECRETARY			
Name	DIAZ, KIMBERLY			

# 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000081810

### Entity Name: FLAGLER PROFESSIONAL HEALTH CARE SERVICES, INC.

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: CARLTON DEVOOGHT

City-State-Zip: SAINT AUGUSTINE FL 32086

400 HEALTH PARK BLVD.

Address

PRESIDENT

04/11/2024

Electronic Signature of Signing Officer/Director Detail

FILED Apr 11, 2024 **Secretary of State** 

Date