2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2022
Secretary of State
6271282439CC

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Entity Name: BRIGHT HEALTHCARE COMPANY OF FLORIDA, INC.

Current Principal Place of Business:

1560 SAWGRASS CORPORATE PARKWAY, SUITE 200
SUNRISE, FL 33323

Current Mailing Address:

1560 SAWGRASS CORPORATE PARKWAY, SUITE 200
SUNRISE, FL 33323 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	D	Title	D
Name	MATUSHAK, JAY	Name	LYFORD, GEORGE
Address	1560 SAWGRASS CORPORATE PARKWAY, SUITE 200	Address	1560 SAWGRASS CORPORATE PARKWAY, SUITE 200
City-State-Zip:	SUNRISE FL 33323	City-State-Zip:	SUNRISE FL 33323
Title	DIRECTOR	Title	DIRECTOR
Name	VALDIVIA, TOMAS	Name	CRAIG, JEFF
Address	1560 SAWGRASS CORPORATE PARKWAY, SUITE 200	Address	1560 SAWGRASS CORPORATE PARKWAY, SUITE 200
City-State-Zip:	SUNRISE FL 33323	City-State-Zip:	SUNRISE FL 33323
Title	DIRECTOR	Title	CEO, PRESIDENT
Name	BRYT , BARTLEY A	Name	MATUSHAK, JAY
Address	1560 SAWGRASS CORPORATE PARKWAY, SUITE 200	Address	1560 SAWGRASS CORPORATE PARKWAY, SUITE 200
City-State-Zip:	SUNRISE FL 33323	City-State-Zip:	SUNRISE FL 33323
Title	CFO	Title	SECRETARY
Name	MATUSHAK, JAY	Name	LYFORD, GEORGE
Address	1560 SAWGRASS CORPORATE PARKWAY, SUITE 200	Address	1560 SAWGRASS CORPORATE PARKWAY, SUITE 200
City-State-Zip:	SUNRISE FL 33323	City-State-Zip:	SUNRISE FL 33323

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: LYFORD , GEORGE SECRETARY 04/29/2022

Electronic Signature of Signing Officer/Director Detail — Date