

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000006976

Entity Name: LAKELAND RADIUS MEDICAL CENTER, INC

Current Principal Place of Business:

340 WEST HIGHLAND DRIVE
411
LAKELAND, FL 33813, FL 33813

Current Mailing Address:

PO BOX 3268
ORLANDO, FL 32802 US

FEI Number: 88-2005393

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ENGLERT, JENNIFER A
12301 LAKE UNDERHILL ROAD
213
ORLANDO, FL 32838 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: JENNIFER ENGLERT

01/31/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name BETANCES, PEDRO
Address PO BOX 530085
City-State-Zip: ORLANDO FL 35853

Title COO
Name VICENTE, ANICIA
Address PO BOX 530085
City-State-Zip: ORLANDO FL 32853

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: ANICIA VICENTE

COO

01/31/2023

Electronic Signature of Signing Officer/Director Detail

Date