2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000083958

Entity Name: LEJEUNE HEALTH CARE GROUP, INC.

Current Principal Place of Business:

1643 NW 136TH AVE BUILDING H, SUITE 100 SUNRISE, FL 33323

Current Mailing Address:

265 BROOKVIEW CENTRE WAY, SUITE 203 KNOXVILLE, TN 37919 US

FEI Number: 65-0951316

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US FILED Apr 10, 2024 Secretary of State 8616440119CC

Certificate of Status Desired: No

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

Officer/Director Detail :

Officer/Director Detail :			
Title	DIRECTOR/PRESIDENT	Title	AS
Name	UPPAL, ROHIT MD	Name	STAIR, JOHN
Address	265 BROOKVIEW CENTRE WAY, SUITE 203	Address	265 BROOKVIEW CENTRE WAY, SUITE 203
City-State-Zip:	KNOXVILLE TN 37919	City-State-Zip:	KNOXVILLE TN 37919
Title	AT	Title	VP
Name	BARRACK, JOHN	Name	CORVINI, MICHAEL
Address	265 BROOKVIEW CENTRE WAY, SUITE 203	Address	265 BROOKVIEW CENTRE WAY, SUITE 203
City-State-Zip:	KNOXVILLE TN 37919	City-State-Zip:	KNOXVILLE TN 37919
Title	VP	Title	TREASURER/SECRETARY
Name	EVANS, ROB	Name	LEONE, ALICE
Address	265 BROOKVIEW CENTRE WAY, SUITE 203	Address	265 BROOKVIEW CENTRE WAY, SUITE 203
City-State-Zip:	KNOXVILLE TN 37919	City-State-Zip:	KNOXVILLE TN 37919
Title	ASST. TREASURER		
Name	OWENS, LARA		
Address	265 BROOKVIEW CENTRE WAY, SUITE 203		
City-State-Zip:	KNOXVILLE TN 37919		

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: JOHN STAIR

ASSISTANT SECRETARY 04/10/2024

Electronic Signature of Signing Officer/Director Detail

Date

Date