

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000735

Entity Name: LAKE ST. CHARLES MEDICAL CENTER, LLC

Current Principal Place of Business:

204 N HOWARD AVE.
TAMPA, FL 33606

Current Mailing Address:

204 N HOWARD AVE.
TAMPA, FL 33606 US

FEI Number: 59-3698159

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SSG COMMERCIAL LLC
204 N HOWARD AVE.
TAMPA, FL 33606 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: DAVID SCHER

03/25/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name SCHER, DAVID J.
Address 204 N HOWARD AVE.
City-State-Zip: TAMPA FL 33606

Title MANAGER
Name SCHER, JENNIFER
Address 204 N HOWARD AVE.
City-State-Zip: TAMPA FL 33606

Title MANAGER
Name BRAY, JARROD
Address 204 N HOWARD AVE.
City-State-Zip: TAMPA FL 33606

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER SCHER

MANAGER

03/25/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date