2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2022
Secretary of State
1889918860CC

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Entity Name: SEQUELCARE OF FLORIDA, LLC

Current Principal Place of Business:

3491 GANDY BOULEVARD
PINELLAS PARK, FL 33781

Current Mailing Address:

3491 GANDY BOULEVARD
PINELLAS PARK, FL 33781 US

FEI Number: 90-0341538

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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: SANDRA YOUNKER 04/07/2022

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	PRESIDENT, COO
Name	KENNY, TOM
Address	1131 EAGLETREE LANE
City-State-Zip:	HUNTSVILLE AL 35801

Title	EXECUTIVE VICE PRESIDENT
Name	GILBERT, STEVE
Address	1131 EAGLETREE LANE
City-State-Zip:	HUNTSVILLE AL 35801

Title	CHAIRMAN, CEO
Name	STUPAK, JOHN
Address	1131 EAGLETREE LANE
City-State-Zip:	HUNTSVILLE AL 35801

Title	CHIEF ADMINISTRATIVE OFFICER
Name	CAGLE, JASON
Address	1131 EAGLETREE LANE
City-State-Zip:	HUNTSVILLE AL 35801

Title	CHIEF ACCOUNTING OFFICER
Name	WALKER, JAMES
Address	1131 EAGLETREE LANE
City-State-Zip:	HUNTSVILLE AL 35801

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: TOM KENNY PRESIDENT 04/07/2022

Electronic Signature of Signing Authorized Person(s) Detail — Date