

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000008199

Entity Name: COASTAL PALMS ANESTHESIA PROVIDERS, LLC

Current Principal Place of Business:

4740 S OCEAN BLVD
1706
HIGHLAND BEACH, FL 33487

Current Mailing Address:

4740 S OCEAN BLVD
1706
HIGHLAND BEACH, FL 33487

FEI Number: 27-1801643

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LENTZ, KIRSTEN
4740 S OCEAN BLVD
PH #6
HIGHLAND BEACH, FL 33487 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: KIRSTEN LENTZ

04/30/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name LENTZ, ROBERT E
Address 4740 S OCEAN BLVD
City-State-Zip: HIGHLAND BEACH FL 33487

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: ROBERT E LENTZ

OWNER

04/30/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date