2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2024
Secretary of State
0311246488CC

DOCUMENT# L10000070830

Entity Name: NATIONAL HEALTHCARE DEVELOPMENT PARTNERS, L.L.C.

Current Principal Place of Business:

26203 OAK RIDGE DRIVE
SUITE 200
THE WOODLANDS, TX 77380

Current Mailing Address:

26203 OAK RIDGE DRIVE
SUITE 200
THE WOODLANDS, TX 77380 US

FEI Number: 90-0659348

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	CMF MANAGEMENT, LLC
Address	26203 OAK RIDGE DRIVE SUITE 200
City-State-Zip:	THE WOODLANDS TX 77380

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: MARK A FEANNY MGR 04/05/2024

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