2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 28, 2025
Secretary of State
4962459219CC

DOCUMENT# L11000053221

Entity Name: SEASONS WOMEN'S CARE, LLC

Current Principal Place of Business:

10115 FOREST HILL BOULEVARD
SUITE 300
WELLINGTON, FL 33414

Current Mailing Address:

4010 W. BOY SCOUT BLVD
SUITE 500
TAMPA, FL 33607 US

FEI Number: 45-2313029

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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: BRIAN WRIGHT 01/28/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MEMBER
Name	FLORIDA WOMAN CARE LLC
Address	4010 W. BOY SCOUT BLVD SUITE 500
City-State-Zip:	TAMPA FL 33607

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: BRIAN WRIGHT AUTHORIZED PERSON 01/28/2025

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