

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000030402

**Entity Name:** SURGCENTER OF PALM BEACH GARDENS LLC

**Current Principal Place of Business:**

900 VILLAGE SQUARE CROSSING  
SUITE 100  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

14201 DALLAS PKWY  
FL 13  
DALLAS, TX 75254 US

**FEI Number:** 46-2315994

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** TERRIE BATES

05/03/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            LEMAISTRE, COLLIN  
Address        900 VILLAGE SQUARE CROSSING  
                 SUITE 100  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            SECRETARY  
Name            BOWDEN, JAMES  
Address        14201 DALLAS PKWY  
                 FL 13  
City-State-Zip: DALLAS TX 75254

Title            AUTHORIZED REPRESENTATIVE  
Name            SIMS, KAREN  
Address        14201 DALLAS PKWY  
                 FL 13  
City-State-Zip: DALLAS TX 75254

*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:** KAREN SIMS

**AUTHORIZED  
REPRESENTATIVE**

05/03/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date