## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000066178

Entity Name: BLUESTONE PHYSICIAN SERVICES SOUTHEAST, LLC

**FILED** Feb 11, 2023 **Secretary of State** 6288119141CC

**Current Principal Place of Business:** 

10150 HIGHLAND MANOR DRIVE TAMPA, FL 33610

## **Current Mailing Address:**

10150 HIGHLAND MANOR DRIVE TAMPA, FL 33610 US

FEI Number: 59-3568197 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

STIVLAND, TODD 10150 HIGHLAND MANOR DRIVE TAMPA, FL 33610 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: TODD STIVLAND 02/11/2023

Electronic Signature of Registered Agent

Date

## Authorized Person(s) Detail:

Title CEO Title **CFO** 

STIVLAND, TODD Name NELSEN, DAVID Name

270 NORTH MAIN STREET Address 270 NORTH MAIN STREET Address SUITE 300

SUITE 300

City-State-Zip: STILLWATER MN 55082 City-State-Zip: STILLWATER MN 55082

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.

**CFO** 

SIGNATURE: DAVID NELSEN