

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000216531

Entity Name: TOWER IMAGING, LLC

Current Principal Place of Business:

2700 UNIVERSITY SQUARE DRIVE
TAMPA, FL 33612-5513

Current Mailing Address:

2700 UNIVERSITY SQUARE DRIVE
TAMPA, FL 33612-5513 US

FEI Number: 59-1433551

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title DIRECTOR
Name OTERO, RAUL R MD
Address 2700 UNIVERSITY SQUARE DRIVE
City-State-Zip: TAMPA FL 33612-5513

Title DIRECTOR
Name ZWIEBEL, BRUCE MD
Address 2700 UNIVERSITY SQUARE DRIVE
City-State-Zip: TAMPA FL 33612-5513

Title PRESIDENT
Name SMITH, ADAM
Address 1 TAMPA GENERAL CIRCLE
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name ZAMORE, ROBERT MD
Address 2700 UNIVERSITY SQUARE DRIVE
City-State-Zip: TAMPA FL 33612-5513

Title VP
Name LEWMAN, SHERRI
Address 1 TAMPA GENERAL CIRCLE
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name KEDAR, RAJENDRA MD
Address 2700 UNIVERSITY SQUARE DRIVE
City-State-Zip: TAMPA FL 33612-5513

Title DIRECTOR
Name COURIS, JOHN
Address 1 TAMPA GENERAL HOSPITAL
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name SMITH, LARRY
Address 2700 UNIVERSITY SQUARE DRIVE
City-State-Zip: TAMPA FL 33612-5513

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: ADAM SMITH

PRESIDENT

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date