2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2021
Secretary of State
5607711346CC

DOCUMENT# L18000106711

Entity Name: CHRONIC CARE MEDICAL MANAGMENT LLC

Current Principal Place of Business:

204 LONE PINE DRIVE
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

204 LONE PINE DRIVE
PALM BEACH GARDENS, FL 33410

FEI Number: 83-0780365

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLER, JEFFREY K
204 LONE PINE DRIVE
PALM BEACH GARDENS, FL 33410 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	Title	MGR
Name	MILLER, JEFFREY K	Name	MARTIN, TONYA
Address	204 LONE PINE DRIVE	Address	7256 VIA ABRUZZI
City-State-Zip:	PALM BEACH GARDENS FL 33410	City-State-Zip:	LAKE WORTH FL 33467

Title	MGR
Name	WEINSTEIN, LAWRENCE
Address	9868 S. STATE RD 7 STE 335
City-State-Zip:	BOYNTON BEACH FL 33472

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: JEFFREY K. MILLER MGR 04/29/2021

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