

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000288630

Entity Name: TLC ANESTHESIA SERVICES, LLC

Current Principal Place of Business:

1112 FEATHER DRIVE
DELTONA, FL 32725

Current Mailing Address:

1112 FEATHER DRIVE
DELTONA, FL 32725

FEI Number: 83-2844385

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLEE, TERRIN
1112 FEATHER DR
DELTONA, FL 32725 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 AMBR
Name COLEE, TERRIN
Address 1112 FEATHER DR
City-State-Zip: DELTONA FL 32725

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: TERRIN COLEE

AMBR

01/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date