

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000289057

Entity Name: FLORIDA SPRINGS SURGERY CENTER,LLC

Current Principal Place of Business:

366 BEVERLY COURT
SPRING HILL, FL 34606-5326

Current Mailing Address:

366 BEVERLY CT
SPRING HILL, FL 34606-5326 US

FEI Number: 83-2895293

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CHESTNUT BUSINESS SERVICES, LLC.
490 1ST AVENUE SOUTH
SUITE 700
ST. PETERSBURG, FL 33701 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
Name FREEDMAN, MARISSA
Address 9131 ANSON WAY, STE 304
City-State-Zip: RALEIGH NC 27615

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: MARISSA FREEDMAN _____

CFO

04/06/2021

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date