#### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000001479

Entity Name: COMPREHENSIVE HEMATOLOGY ONCOLOGY, LLC

**FILED** Feb 09, 2024 **Secretary of State** 1277002389CC

## **Current Principal Place of Business:**

5000 PARK STREET N ST. PETERSBURG, FL 33709

### **Current Mailing Address:**

14690 SPRING HILL DR SUITE 101 SPRING HILL, FL 34609 US

FEI Number: 83-3031637 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

SINGH, PARIKSITH DR. 14690 SPRING HILL DR SUITE 101 SPRING HILL, FL 34609 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: PARIKSITH SINGH 02/09/2024

Electronic Signature of Registered Agent

Date

#### Authorized Person(s) Detail:

Title MGR

SINGH, PARIKSITH DR. Name 14690 SPRING HILL DR Address

SUITE 101

SIGNATURE: PARIKSITH SINGH MD

SPRING HILL FL 34609 City-State-Zip:

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail

02/09/2024

Date