

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000265605

Entity Name: PARK HEALTH SYSTEMS LLC

Current Principal Place of Business:

2001 EAST 2ND AVE
6C
TAMPA, FL 33605

Current Mailing Address:

2001 EAST 2ND AVE
6C
TAMPA, FL 33605 US

FEI Number: 84-3603845

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARKER, KYLA R
2001 EAST 2ND AVE
6C
TAMPA, FL 33605 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 MANAGER
Name PARKER, KYLA RENEE
Address 2001 EAST 2ND AVE
 6C
City-State-Zip: TAMPA FL 33605

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: KYLA PARKER

MANAGER

02/24/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date