2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 26, 2025
Secretary of State
3522368641CC

DOCUMENT# L20000288259

Entity Name: FLORIDA ORAL AND MAXILLOFACIAL SURGERY OF PLANT CITY, LLC

Current Principal Place of Business:

15170 N FLORIDA AVE
TAMPA, FL 33613

Current Mailing Address:

15170 N FLORIDA AVE
TAMPA, FL 33613 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TK REGISTERED AGENT, INC.
101 E. KENNEDY BOULEVARD
SUITE 2700
TAMPA, FL 33602 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: KATHLEEN M. BICKELHAUPT 02/26/2025

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	BARBICK, DMD, MD, MICHAEL
Address	15170 N FLORIDA AVE
City-State-Zip:	TAMPA FL 33613

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: MICHAEL BARBICK, DMD, MD MANAGER 02/26/2025

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