

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000533274

Entity Name: BAPTIST SOUTH SURGERY CENTER LLC

Current Principal Place of Business:

14540 OLD ST. AUGUSTINE ROAD
MEDICAL OFFICE BUILDING 2
JACKSONVILLE, FL 32258

Current Mailing Address:

14540 OLD ST. AUGUSTINE ROAD
MEDICAL OFFICE BUILDING 2
JACKSONVILLE, FL 32258 US

FEI Number: 92-1168204

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TICKELL, KEITH
841 PRUDENTIAL DRIVE
SUITE 1802
JACKSONVILLE, FL 32207 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 AUTHORIZED MEMBER
Name BAPTIST-COMPASS SURGICAL
VENTURES, LLC
Address 9131 ANSON WAY
SUITE 304
City-State-Zip: RALEIGH NC 27615

Title AUTHORIZED MEMBER
Name PAVILION HEALTH SERVICES, INC.
Address 841 PRUDENTIAL DRIVE, SUITE 1802
City-State-Zip: JACKSONVILLE FL 32207

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: KEITH TICKELL

REGISTERED AGENT

04/07/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date