

2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000005375

Entity Name: HTA - FL ORTHO INSTITUTE ASC, LLC

Current Principal Place of Business:

3310 WEST END AVENUE
SUITE 700
NASHINVILLE, TN 37203

Current Mailing Address:

3310 WEST END AVENUE
SUITE 700
NASHINVILLE, TN 37203 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 MEMBER
Name HEALTHCARE REALTY HOLDINGS,
L.P.
Address 3310 WEST END AVENUE
SUITE 700
City-State-Zip: NASHINVILLE TN 37203

Title AUTHORIZED PERSON
Name LOOPE, ANDREW E.
Address 3310 WEST END AVENUE
SUITE 700
City-State-Zip: NASHINVILLE TN 37203

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: ANDREW E. LOOPE

AUTHORIZED PERSON

02/22/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date