2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 26, 2020
Secretary of State
5184349250CC

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Entity Name: PHYSICIAN PARTNERS OF AMERICA, LLC

Current Principal Place of Business:

504 N. REO ST.
TAMPA, FL 33609

Current Mailing Address:

504 N. REO ST.
TAMPA, FL 33609 US

FEI Number: 90-0962715

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAJAN-WILSON, REKHA
504 N. REO ST.
TAMPA, FL 33609 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: REKHA RAJAN-WILSON 06/26/2020

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	COO
Name	WOOD, DAVID A	Name	HELMS, JOSH
Address	504 N. REO ST.	Address	504 N. REO ST.
City-State-Zip:	TAMPA FL 33609	City-State-Zip:	TAMPA FL 33609
Title	VP FINANCE	Title	CAO
Name	MARY, PRIOLO	Name	LAWSON, TRACIE
Address	504 N. REO ST.	Address	504 N. REO ST.
City-State-Zip:	TAMPA FL 33609	City-State-Zip:	TAMPA FL 33609

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: MARY PRIOLO VP FINANCE 06/26/2020

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