## 2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M17000002072

Entity Name: SIMPSON HEALTHCARE EXECUTIVES, LLC

**Current Principal Place of Business:** 

230 SHORE ROAD OLD LYME, CT 06371

**Current Mailing Address:** 

230 SHORE ROAD

OLD LYME. CT 06371 US

FEI Number: 06-1519232 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC. 3458 LAKESHORE DRIVE TALLAHASSEE, FL 32312 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

**FILED** Feb 27, 2024

**Secretary of State** 

6441961163CC

Authorized Person(s) Detail:

Title **MEMBER** Title CEO

ANGELINI, KELLY Name ALGIERE, SCOTT Name 230 SHORE ROAD Address 230 SHORE ROAD Address City-State-Zip: OLD LYME CT 06371 City-State-Zip: OLD LYME CT 06371

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.

CEO

Electronic Signature of Signing Authorized Person(s) Detail