

2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000002959

Entity Name: LAKE WORTH 5645 MEDICAL PROPERTIES, LLC

Current Principal Place of Business:

ONE TOWN CENTER ROAD
STE:300
BOCA RATON, FL 33486

Current Mailing Address:

ONE TOWN CENTER ROAD
STE:300
BOCA RATON, FL 33486 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 AP
Name MOTISI, MEEGAN T
Address ONE TOWN CENTER ROAD
City-State-Zip: BOCA RATON FL 33486

Title AUTHORIZED REPRESENTATIVE
Name WESTMEYER, PETER
Address ONE TOWN CENTER ROAD
SUITE 300
City-State-Zip: BOCA RATON FL 33486

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: MEEGAN MOTISI

AUTHORIZED SIGNER

01/28/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date