

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000281670

Entity Name: ALC PHYSICIAN SERVICES, LLC

Current Principal Place of Business:

13500 SUTTON PARK DR S
504
JACKSONVILLE, FL 32224

Current Mailing Address:

13500 SUTTON PARK DR S
504
JACKSONVILLE, FL 32224

FEI Number: 88-2935522

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDERSON, BRIAN D
13500 SUTTON PARK DRIVE S
504
JACKSONVILLE, FL 32224 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 MGR
Name ANDERSON, BRIAN D
Address 13500 SUTTON PARK DRIVE S, 504
City-State-Zip: JACKSONVILLE FL 32224

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: BRIAN D ANDERSON

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04/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date