

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V58206

Entity Name: CENTERWELL SENIOR PRIMARY CARE (FL), INC.

Current Principal Place of Business:

500 WEST MAIN STREET
LOUISVILLE, KY 40202

Current Mailing Address:

500 WEST MAIN STREET
LOUISVILLE, KY 40202 US

FEI Number: 59-3164234

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33332 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

Officer/Director Detail :

Title DIRECTOR
Name BROUSSARD, BRUCE DALE
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR
Name BUCKINGHAM, RENEE JACQUELINE
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR
Name FLEMING, WILLIAM KEVIN
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title PRESIDENT
Name BUCKINGHAM, RENEE JACQUELINE
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title VP, FINANCE
Name JUDD, PATRICK NICHOLAS
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title VP, ASSOCIATE GENERAL COUNSEL
AND CORPORATE SECRETARY
Name RUSCHELL, JOSEPH MATTHEW
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title TAX DIRECTOR
Name FELD, DANIEL KEVIN
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title SENIOR VICE PRESIDENT,
ENTERPRISE ASSOCIATE &
BUSINESS SOLUTIONS
Name EDWARDS, DOUGLAS ALLEN
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIEL KEVIN FELD

TAX DIRECTOR

03/12/2024

Electronic Signature of Signing Officer/Director Detail

Date