	State of R	hode Island		Fee: \$50.00
	Office of the Se	ecretary of St	ate	
		usiness Services liver Street	5	
		RI 02904-2615		
7636	(401) 2	22-3040		
Limited Liability Company Annual Report Filing Period: February 1 - May 1				
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR: 2023				
1. ID No. <u>000823580</u>				
<b>2. Exact Name of the Limited Liability Company</b> <u>PROSPECT CHARTERCARE PHYSICIANS,</u> <u>LLC</u>				
3. State of Formation				
State: <u>RI</u>				
ARTICLE III				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>621610</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
HEALTH CARE				
5. Principal Office Address				
	S. SEPULVEDA BLVD. FLOOR			
	ANGELES	State: <u>CA</u>	Zip: <u>90034</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
	S. SEPULVEDA BLVD.			
City or Town: <u>LOS A</u>	<u>NGELES</u>	State: <u>CA</u>	Zip: <u>90034</u>	Country: <u>USA</u>

## 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE , RI 02914

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 20 Day of April, 2023 at 10:27:35 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

## By BRAD SLENKER

Signature of Authorized Person

Form No. 632 Revised 09/07

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