

UNITED STATES BANKRUPTCY COURT

DISTRICT OF Delaware

In re: Cano Health of Florida, LLC

Case No. 24-10170

Debtor(s)

§
§
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Lead Case No. 24-10164

Jointly Administered

Post-confirmation Report

Chapter 11

Quarter Ending Date: 08/13/2024

Petition Date: 02/04/2024

Plan Confirmed Date: 06/28/2024

Plan Effective Date: 06/28/2024

This Post-confirmation Report relates to: Reorganized Debtor

Other Authorized Party or Entity:

Name of Authorized Party or Entity

/s/ Eladio Gil

Signature of Responsible Party

09/06/2024

Date

Eladio Gil

Printed Name of Responsible Party

9725 NW 117th Ave, Miami, FL 33178

Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.



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Debtor's Name Cano Health of Florida, LLC

Case No. 24-10170

Part 1: Summary of Post-confirmation Transfers

| | Current Quarter | Total Since Effective Date |
|--|-----------------|----------------------------|
| a. Total cash disbursements | \$0 | \$0 |
| b. Non-cash securities transferred | \$0 | \$0 |
| c. Other non-cash property transferred | \$0 | \$0 |
| d. Total transferred (a+b+c) | \$0 | \$0 |

Part 2: Preconfirmation Professional Fees and Expenses

| a. | | | Approved Current Quarter | Approved Cumulative | Paid Current Quarter | Paid Cumulative |
|-----------------------------------|--|------|--------------------------|---------------------|----------------------|-----------------|
| | Professional fees & expenses (bankruptcy) incurred by or on behalf of the debtor | | <i>Aggregate Total</i> | | | |
| <i>Itemized Breakdown by Firm</i> | | | | | | |
| | Firm Name | Role | | | | |
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| | | Approved Current Quarter | Approved Cumulative | Paid Current Quarter | Paid Cumulative |
|----|--|--------------------------|---------------------|----------------------|-----------------|
| b. | Professional fees & expenses (nonbankruptcy) incurred by or on behalf of the debtor <i>Aggregate Total</i> | | | | |
| | <i>Itemized Breakdown by Firm</i> | | | | |
| | | Firm Name | Role | | |
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| c. | All professional fees and expenses (debtor & committees) | | | \$0 | \$0 | \$0 | \$0 |

Part 3: Recoveries of the Holders of Claims and Interests under Confirmed Plan

| | Total Anticipated Payments Under Plan | Paid Current Quarter | Paid Cumulative | Allowed Claims | % Paid of Allowed Claims |
|-----------------------------|---------------------------------------|----------------------|-----------------|----------------|--------------------------|
| a. Administrative claims | \$0 | \$0 | \$0 | \$0 | 0% |
| b. Secured claims | \$0 | \$0 | \$0 | \$0 | 0% |
| c. Priority claims | \$0 | \$0 | \$0 | \$0 | 0% |
| d. General unsecured claims | \$0 | \$0 | \$0 | \$0 | 0% |
| e. Equity interests | \$0 | \$0 | \$0 | \$0 | 0% |

Part 4: Questionnaire

- a. Is this a final report? Yes No
 If yes, give date Final Decree was entered: 08/13/2024
 If no, give date when the application for Final Decree is anticipated: _____
- b. Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930? Yes No

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Privacy Act Statement

28 U.S.C. § 589b authorizes the collection of this information and provision of this information is mandatory. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6) and to otherwise evaluate whether a reorganized chapter 11 debtor is performing as anticipated under a confirmed plan. Disclosure of this information may be to a bankruptcy trustee when the information is needed to perform the trustee's duties, or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." *See* 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case, or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

I declare under penalty of perjury that the foregoing Post-confirmation Report and its attachments, if any, are true and correct and that I have been authorized to sign this report.

/s/ Eladio Gil

Signature of Responsible Party

Chief Financial Officer

Title

Eladio Gil

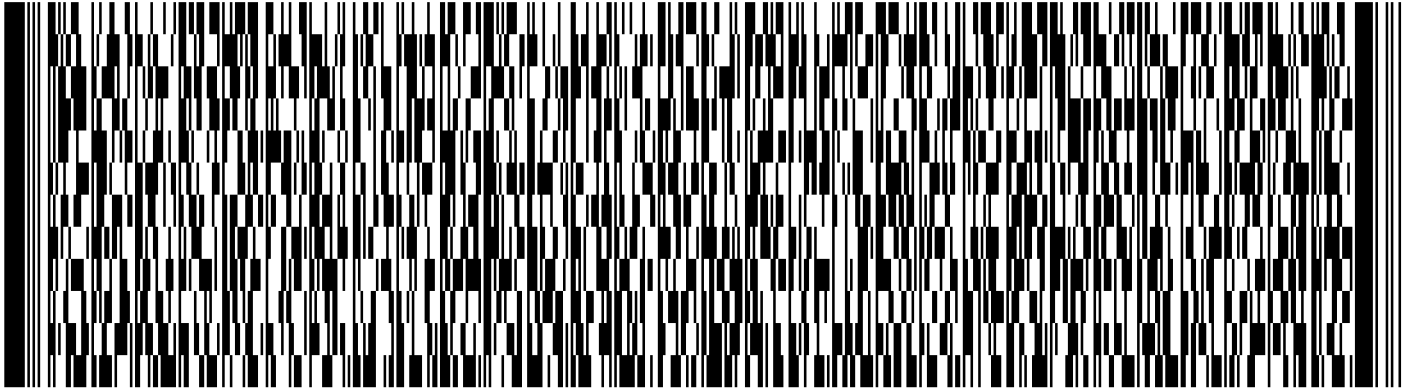
Printed Name of Responsible Party

09/06/2024

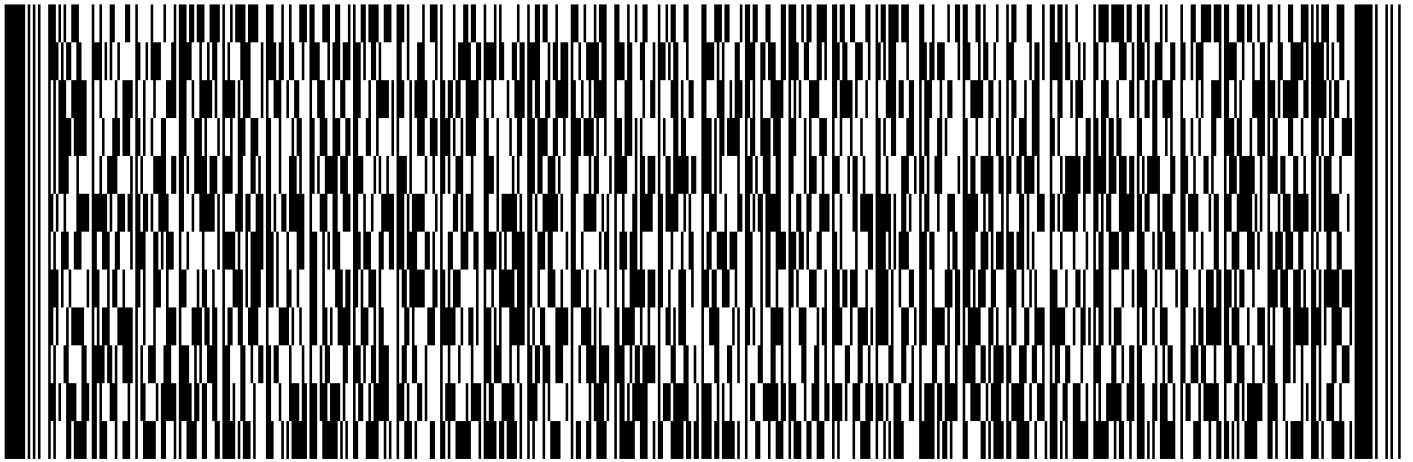
Date

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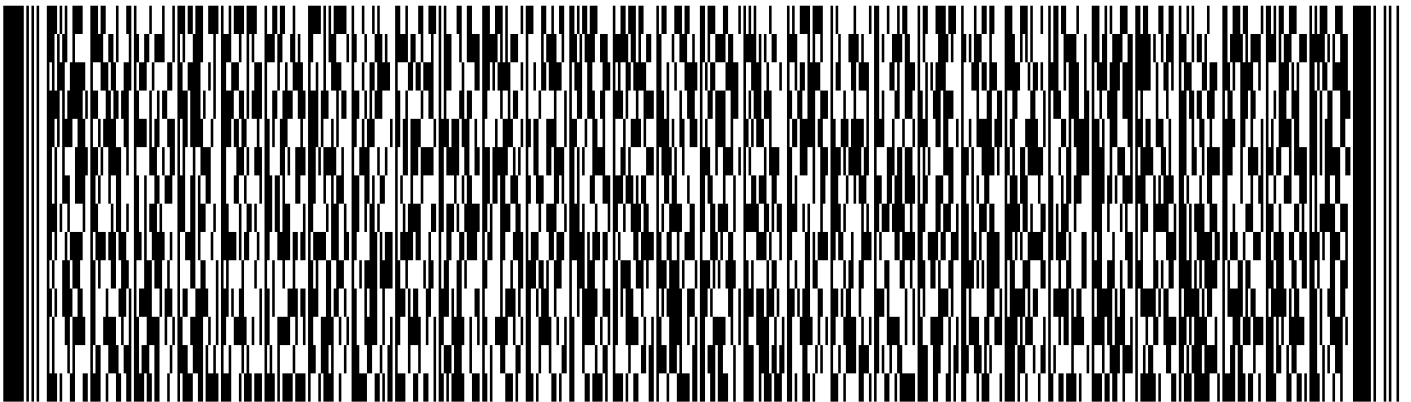
Case No. 24-10170



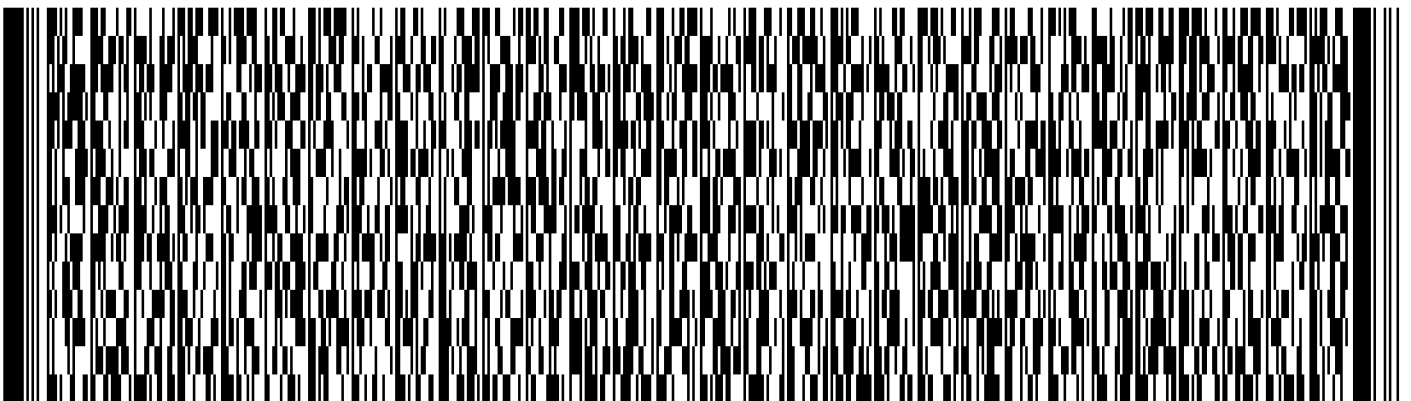
Page 1



Other Page 1



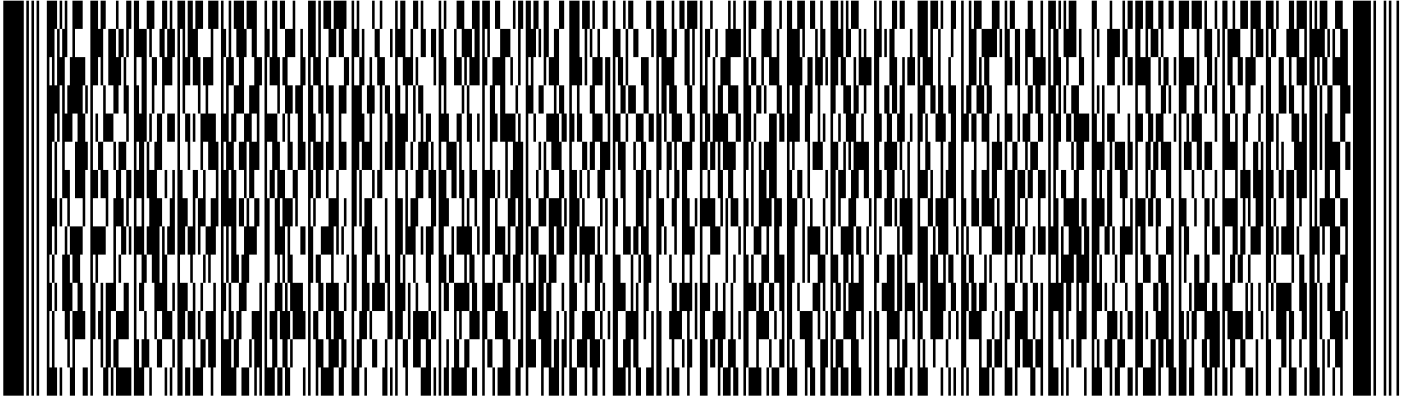
Page 2 Minus Tables



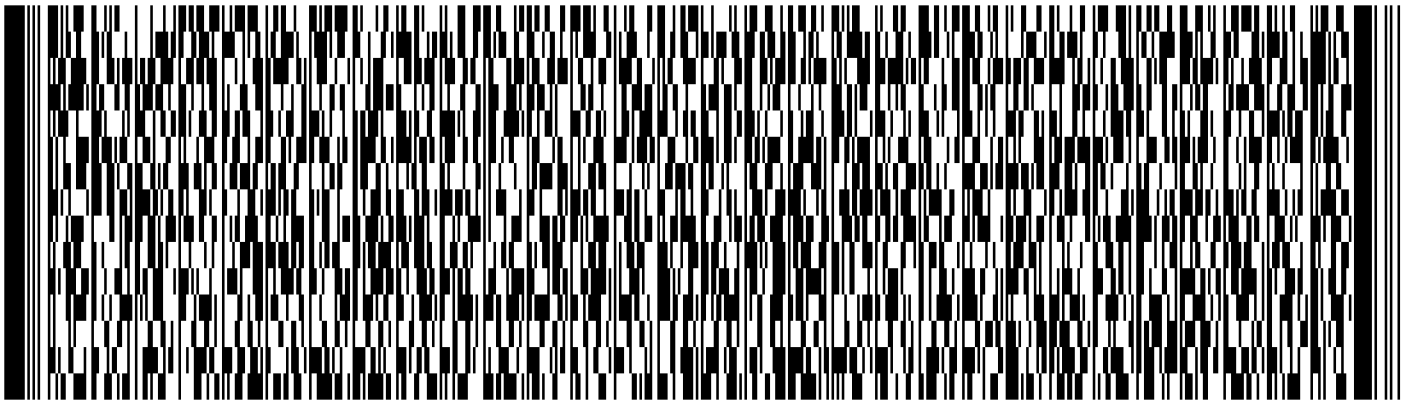
Bankruptcy Table 1-50

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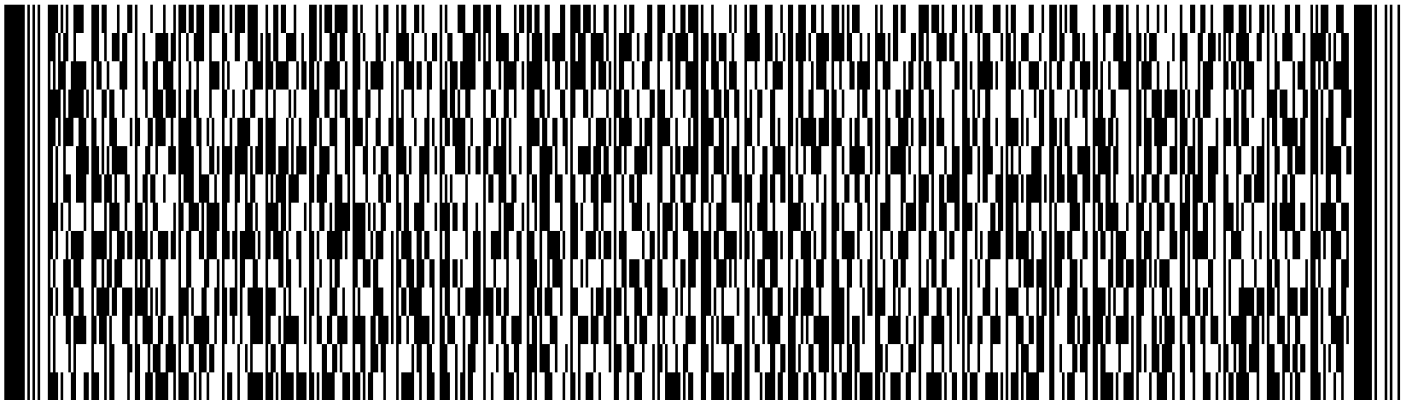
Case No. 24-10170



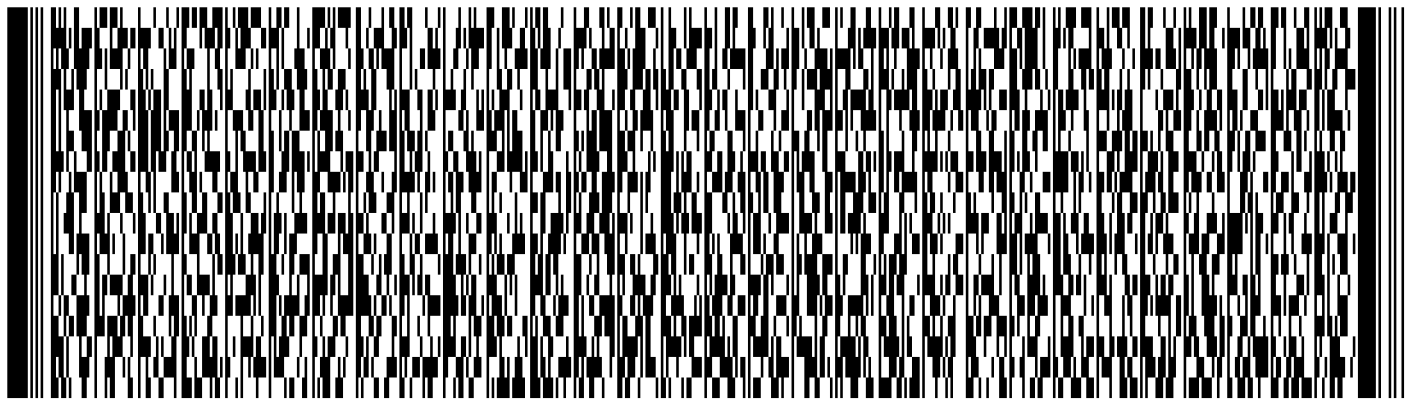
Bankruptcy Table 51-100



Non-Bankruptcy Table 1-50



Non-Bankruptcy Table 51-100



Part 3, Part 4, Last Page