

2018 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A10000000311

Entity Name: LAVENDER HEALTH CARE OF FLORIDA, LLLP

Current Principal Place of Business:

2901 SOUTH TAMIAMI TRAIL
SARASOTA, FL 34239

Current Mailing Address:

2901 SOUTH TAMIAMI TRAIL
SARASOTA, FL 34239 US

FEI Number: 27-2743891

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KIMSEY, RICHARD LEE
2901 SOUTH TAMIAMI TRAIL
SARASOTA, FL 34239 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

General Partner Detail :

Document # L09000097977
Name LAVENDER HEALTH CARE
MANAGEMENT, LLC
Address 2901 SOUTH TAMIAMI TRAIL
City-State-Zip: SARASOTA FL 34239

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RICHARD KIMSEY

CEO

03/05/2018

Electronic Signature of Signing General Partner Detail

Date