

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000128106

Entity Name: BROWN'S REGISTERED NURSES & GERIATRIC CARE MANAGERS, INC.

Current Principal Place of Business:

5435 MONTEREY CIRCLE
23
DELRAY BEACH, FL 33484

Current Mailing Address:

5435 MONTEREY CIRCLE
23
DELRAY BEACH, FL 33484

FEI Number: 26-1520281

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, CANDICE
5435 MONTEREY CIRCLE
23
DELRAY BEACH, FL 33484 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 MS.
Name BROWN, CANDICE
Address 5435 MONTEREY CIRCLE UNIT 23
City-State-Zip: DELRAY BEACH FL 33484

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: CANDICE BROWN

PRESIDENT

03/01/2018

Electronic Signature of Signing Officer/Director Detail

Date