

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000089916

Entity Name: NATIONAL HOME HEALTH CARE VOLUSIA, INC.

Current Principal Place of Business:

301 N PINE MEADOW DRIVE
STE E
DEBARY , FL 32713

Current Mailing Address:

301 N PINE MEADOW DRIVE
STE E
DEBARY, FL 32713 US

FEI Number: 27-3857263

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VSTATE FILINGS LLC
7064 NORTHWEST 49TH STREET
LAUDERHILL, FL 33319 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 C
Name ELEVATE HOME HEALTH GROUP OF JACKSONVILLE
Address 301 N PINE MEADOW DRIVE
STE E
City-State-Zip: DEBARY FL 32713

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: ALISON SANCHEZ, RN

AUTHORIZED PERSON

01/30/2025

Electronic Signature of Signing Officer/Director Detail

Date