

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000019904

Entity Name: NATIONWIDE HEALTH, L.L.C.

Current Principal Place of Business:

1000 WEST MCNAB ROAD
STE. 242
POMPANO BEACH, FL 33069

Current Mailing Address:

1000 WEST MCNAB ROAD
STE. 242
POMPANO BEACH, FL 33069 US

FEI Number: 20-2418527

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MIERZWA & ASSOCIATES, P.A.
3900 WOODLAKE BLVD STE. 212
LAKE WORTH, FL 33463-3045 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

Authorized Person(s) Detail :

Title MGR
Name MATHERLY, RICHARD D
Address 1000 W. MCNAB ROAD
SUITE 242
City-State-Zip: POMPANO BEACH FL 33069

Title MGRM
Name MATHERLY, DEBRA L
Address 1000 WEST MCNAB ROAD
STE. 242
City-State-Zip: POMPANO BEACH FL 33069

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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RICHARD D. MATHERLY

OWNER

04/25/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date