

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000009849

Entity Name: ALTERCARE OF PALM BEACH COUNTY, LLC

Current Principal Place of Business:

4731 W ATLANTIC AVENUE
B-10
DELRAY BEACH, FL 33445

Current Mailing Address:

4731 W ATLANTIC AVENUE
B-10
DELRAY BEACH, FL 33445 US

FEI Number: 11-3836040

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DORETSKY, DAVID
1001 W CYPRESS CREEK ROAD STE 308
FT. LAUDERDALE, FL 33309 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 LEVITIN, MALCOLM
Address 349 LINCOLN AVE.
City-State-Zip: ROCKVILLE CENTER NY 11570

Title MGR
Name DORETSKY, DAVE
Address 7404 BONDSBERRY CT.
City-State-Zip: BOCA RATON FL 33434

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: DAVE DORETSKY

EXEC V.P.

01/08/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date