

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000075114

Entity Name: SUNRISE HEALTH CARE MANAGEMENT LLC

Current Principal Place of Business:

900 S.E. 3RD AVENUE
THIRD FLOOR
FORT LAUDERDALE, FL 33316

Current Mailing Address:

PO BOX 30410
FORT LAUDERDALE, FL 33303

FEI Number: 26-3121501

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DERY, KEITH
2630 N.E. 10TH AVENUE
POMPANO BEACH, FL 33064 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 BOUVIER, GARY
Address 1505 S.E. 2ND STREET
City-State-Zip: FORT LAUDERDALE FL 33301

Title MGR
Name DERY, KEITH
Address 2630 N.E. 10TH AVENUE
City-State-Zip: POMPANO BEACH FL 33064

Title MGR
Name SEZAVAR, IRAJ
Address 110 N FEDERAL HWY - # 805
City-State-Zip: FT LAUDERDALE FL 33301

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KEITH DERY

MGR

04/30/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date