

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000109094

Entity Name: NADINE'S ADULT HOME CARE & CONSULTING, LLC

Current Principal Place of Business:

317 PENNFIELD ST
LEHIGH ACRES, FL 33974

Current Mailing Address:

317 PENNFIELD ST
LEHIGH ACRES, FL 33974 US

FEI Number: 27-1302947

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KETTLE, NADINE
317 PENNFIELD ST
LEHIGH ACRES, FL 33974 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 MGRM
Name KETTLE, NADINE
Address 317 PENNFIELD ST
City-State-Zip: LEHIGH ACRES FL 33974

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: NADINE KETTLE

MGM

03/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date