

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000064890

**Entity Name:** IN TOUCH HOME HEALTH LLC

**Current Principal Place of Business:**

1435 GULF TO BAY BLVD  
SUITE D  
CLEARWATER, FL 33755

**Current Mailing Address:**

1435 GULF TO BAY BLVD  
SUITE D  
CLEARWATER, FL 33755 US

**FEI Number:** 27-2889843

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RUIZ, RENE S  
1435 GULF TO BAY BLVD  
SUITE D  
CLEARWATER, FL 33755 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           MANAGER  
Name           HEALTHCARE ALLIANCE LLC  
Address        1435 GULF TO BAY BLVD  
                  SUITE D  
City-State-Zip: CLEARWATER FL 33755

*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:** RENE RUIZ

CFO

04/15/2020

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date