#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000069901

Entity Name: CORNERSTONE HOME CARE SERVICES, LLC

**FILED** Apr 16, 2020 **Secretary of State** 4071417396CC

### **Current Principal Place of Business:**

2903 WEST NEW HAVEN AVE.404

404

WEST MELBOURNE, FL 32904

# **Current Mailing Address:**

2903 W. NEW HAVEN AVE.

MELBOURNE, FL 32904

FEI Number: 27-2961602 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

POLLAN, ADINA L. ESQ. 301 WEST BAY STREET JACKSONVILLE, FL 32202 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: ADINA L. POLLAN 04/16/2020

Electronic Signature of Registered Agent

Date

## Authorized Person(s) Detail:

Title PRESIDENT/CEO LAWRENCE, VAUNA Name

Address 2903 W. NEW HAVEN AVE.

MELBOURNE FL 32904 City-State-Zip:

SIGNATURE: VAUNA LAWRENCE

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.

**CEO** 

Electronic Signature of Signing Authorized Person(s) Detail

04/16/2020

Date