

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000069901

**Entity Name:** CORNERSTONE HOME CARE SERVICES, LLC

**Current Principal Place of Business:**

2903 W. NEW HAVEN AVE.  
404  
MELBOURNE, FL 32904

**Current Mailing Address:**

2903 W. NEW HAVEN AVE.  
404  
MELBOURNE, FL 32904

**FEI Number:** 27-2961602

**Certificate of Status Desired:** No

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

WHITE, RODNEY SCPA  
2903 W. NEW HAVEN AVE.  
404  
MELBOURNE, FL 32904 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 HYATT-LAWRENCE, VAUNA R RN  
Address 2903 W. NEW HAVEN AVE., STE. 404  
City-State-Zip: MELBOURNE FL 32904

*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:** VAUNA HYATT-LAWRENCE

MGRM

04/14/2014

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

\_\_\_\_\_  
Date