

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000090575

Entity Name: KARING FOCUS HEALTH CARE SERVICES, LLC

Current Principal Place of Business:

527 BRISTOL CIRCLE
KISSIMMEE, FL 34758

Current Mailing Address:

527 BRISTOL CIRCLE
KISSIMMEE, FL 34758

FEI Number: 27-3341276

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOOTHE, SHERON
527 BRISTOL CIRCLE
KISSIMMEE, FL 34758 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	Title	MGRM
Name	BOOTHE, SHERON	Name	JEUDY, CURTIS
Address	527 BRISTOL CIRCLE	Address	527 BRISTOL CIRCLE
City-State-Zip:	KISSIMEE FL 34758	City-State-Zip:	KISSIMEE FL 34758

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: SHERON BOOTHE

MGR

04/28/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date