

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000077527

Entity Name: ONCALL FOR SAFER HEALTHCARE, LLC

Current Principal Place of Business:

22 SKINNERS PATH
MARBLEHEAD , MA 01945

Current Mailing Address:

22 SKINNERS PATH
MARBLEHEAD , MA 01945 US

FEI Number: 45-2681196

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MANTING BREWER, NICHOLAS A
22215 MELODY LANE
BROOKSVILLE , FL 34601 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
Name MANTING, MICHELE A
Address 22 SKINNERS PATH
City-State-Zip: MARBLEHEAD MA 01945

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: MICHELE MANTING

MANAGER

04/19/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date