## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000092626

Entity Name: ANY-TIME NURSING SERVICES, LLC

**Current Principal Place of Business:** 

1200 PERI ST.

OPALOCKA, FL 33054

**Current Mailing Address:** 

PO BOX 24-3862

BOYNTON BEACH, FL 33424 US

FEI Number: 46-3086260 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BURGOS, FRANCES 1200 PERI ST. OPALOCKA, FL 33054 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

FILED Mar 31, 2017

**Secretary of State** 

CC3762186641

## Authorized Person(s) Detail:

Title MGRM

Name BURGOS, FRANCES

Address 1200 PERI ST.

City-State-Zip: OPALOCKA FL 33054

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.

**MGRM** 

SIGNATURE: FRANCES BURGOS