

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000094793

Entity Name: ADVANCE NURSING CONCEPTS LLC

Current Principal Place of Business:

1249 ESSEX DRIVE N
ST PETERSBURG, FL 33710

Current Mailing Address:

1249 ESSEX DRIVE N
ST PETERSBURG, FL 33710 US

FEI Number: 46-3198128

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDERSON, KRISTI
1249 ESSEX DRIVE N
ST PETERSBURG, FL 33710 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 ANDERSON, KRISTI
Address 1249 ESSEX DRIVE N
City-State-Zip: ST PETERSBURG FL 33710

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: KRISTI ANDERSON

MGR

01/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date