## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000163555

Entity Name: QUALITAS HOME MEDICAL SERVICES, LLC

**Current Principal Place of Business:** 

3700 COMMERCE PARKWAY MIRAMAR. FL 33025

**Current Mailing Address:** 

3700 COMMERCE PARKWAY MIRAMAR, FL 33025 US

FEI Number: 47-4658693 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GALE, DONNA M 3700 COMMERCE PARKWAY MIRAMAR, FL 33025 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: DONNA M. GALE 02/07/2023

Electronic Signature of Registered Agent

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Authorized Person(s) Detail :

Title SCOO Title EVP

Name MENDEZ, LINDA Name JOBLOVE, KAREN

Address 3700 COMMERCE PARKWAY Address 3700 COMMERCE PARKWAY

City-State-Zip: MIRAMAR FL 33025 City-State-Zip: MIRAMAR FL 33025

Title MGR Title MGR

Name CROSBY, CHRISTOPHER J Name HILINSKI, SCOTT

Address 3700 COMMERCE PARKWAY Address 3700 COMMERCE PARKWAY

City-State-Zip: MIRAMAR FL 33025 City-State-Zip: MIRAMAR FL 33025

Title MGR Title MGR

Name VINCIGUERRA, CHRISTOPHER Name RODRIGUEZ, RAUL

Address 3700 COMMERCE PARKWAY Address 3700 COMMERCE PARKWAY

City-State-Zip: MIRAMAR FL 33025 City-State-Zip: MIRAMAR FL 33025

Title MGR Title CEO, MANAGER

Name PEREDA, JORGE A Name BRADBURY, CHRISTOPHER J
Address 3700 COMMERCE PARKWAY Address 3700 COMMERCE PARKWAY

City-State-Zip: MIRAMAR FL 33025 City-State-Zip: MIRAMAR FL 33025

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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: LINDA MENDEZ COO 02/07/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Feb 07, 2023

**Secretary of State** 

0886814908CC

Date

## Authorized Person(s) Detail Continued :

Title CFO, TREASURER
Name HAFT, STEVEN P

Address 3700 COMMERCE PARKWAY

City-State-Zip: MIRAMAR FL 33025