

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000005367

**Entity Name:** AMERICAN GERIATRIC CARE GROUP, LLC

**Current Principal Place of Business:**

140 SOUTH BEACH STREET  
SUITE 308  
DAYTONA BEACH, FL 32114

**Current Mailing Address:**

140 SOUTH BEACH STREET  
SUITE 308  
DAYTONA BEACH, FL 32114 US

**FEI Number:** 35-2492275

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BELLOTTI, DAVID  
140 SOUTH BEACH STREET  
SUITE 308  
DAYTONA BEACH, FL 32114 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 MGRM  
Name BELLOTTI, DAVID  
Address 140 SOUTH BEACH STREET, SUITE  
205  
City-State-Zip: DAYTONA BEACH FL 32114

*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:** DAVID BELLOTTI

**MANAGING MEMBER**

**01/10/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date