

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000044442

Entity Name: COMMUNITY CARE OF FLORIDA, LLC

Current Principal Place of Business:

11601 KEW GARDENS AVENUE, SUITE 200
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

200 STEVENS DRIVE
PHILADELPHIA, PA 19113 US

FEI Number: 37-1752699

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DIRECTOR
Name DAVITA, CHARLES
Address 4800 DEERWOOD CAMPUS PKWY,
 DC9-1
City-State-Zip: JACKSONVILLE FL 32246-8273

Title DIRECTOR
Name BOHNER, STEVEN H
Address 200 STEVENS DRIVE
City-State-Zip: PHILADELPHIA PA 19113

Title DIRECTOR
Name JAKUC, PETER A
Address 200 STEVENS DRIVE
City-State-Zip: PHILADELPHIA PA 19113

Title DIRECTOR
Name RITTENOUR, DEBRA A
Address 4800 DEERWOOD CAMPUS PKWY,
 DC9-1
City-State-Zip: JACKSONVILLE FL 32246-8273

Title DIRECTOR
Name JERNIGAN, JAMES MICHAEL
Address 4390 BELLE OAKS DRIVE
 SUITE 300
City-State-Zip: NORTH CHARLESTON SC 29405

Title DIRECTOR
Name PATEL, PRAKASH DR.
Address 4800 DEERWOOD CAMPUS PKWY,
 DC9-1
City-State-Zip: JACKSONVILLE FL 32246-8273

Title PRESIDENT
Name CHENETTE, DWIGHT D
Address 11601 KEW GARDENS AVENUE
 SUITE 200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title SECRETARY
Name GILMAN, ROBERT H
Address 200 STEVENS DRIVE
City-State-Zip: PHILADELPHIA PA 19113

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: ROBERT H. GILMAN

SECRETARY

04/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date