

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000061449

Entity Name: SOCIAL CARE SERVICES LLC

Current Principal Place of Business:

8833 PERIMETER PARK BLVD
SUITE 201
JACKSONVILLE, FL 32216

Current Mailing Address:

8833 PERIMETER PARK BLVD
SUITE 201
JACKSONVILLE, FL 32216 US

FEI Number: 46-5449709

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WARREN, JOHN
8833 PERIMETER PARK BLVD STE 201
JACKSONVILLE, FL 32216 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 AMBR
Name WARREN, JOHN R
Address 8833 PERIMETER PARK BLVD
 SUITE 201
City-State-Zip: JACKSONVILLE FL 32216

Title AMBR
Name WARREN, PATRICIA L
Address 8833 PERIMETER PARK BLVD
 SUITE 201
City-State-Zip: JACKSONVILLE FL 32216

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: JOHN R WARREN

CEO

01/02/2022

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date