## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000165136

Entity Name: EMMANUEL HOME HEALTH LLC

**Current Principal Place of Business:** 

997 PIPERS CAY DRIVE WEST PALM BEACH. FL 33415

**Current Mailing Address:** 

997 PIPERS CAY DRIVE

WEST PALM BEACH. FL 33415 US

FEI Number: 47-2141747 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BURTON-EMMANUEL, COLEEN M 997 PIPERS CAY DRIVE WEST PALM BEACH, FL 33415 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: COLEEN M BURTON-EMMANUEL 02/01/2018

Electronic Signature of Registered Agent

Date

FILED Feb 01, 2018

**Secretary of State** 

CC7816714780

Authorized Person(s) Detail:

Title MANAGER

Name BURTON-EMMANUEL, COLEEN M

Address 997 PIPERS CAY DRIVE

City-State-Zip: WEST PALM BEACH FL 33415

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: COLEEN BURTON-EMMANUEL

**MANAGER** 

02/01/2018