

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000180969

Entity Name: CARING PEOPLE MEDICARE SERVICES LLC

Current Principal Place of Business:

5300 WEST ATLANTIC BLVD SUITE 201
DELRAY BEACH, FL 33484

Current Mailing Address:

5300 WEST ATLANTIC BLVD SUITE 201
DELRAY BEACH, FL 33484 US

FEI Number: 47-2402911

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S 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: STEVEN EAST

01/25/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	BARR, GREGORY M	Name	GUSTAFSON, ANDREW
Address	1560 SHERMAN AVE SUITE 1200	Address	1560 SHERMAN AVE SUITE 1200
City-State-Zip:	EVANSTON IL 60201	City-State-Zip:	EVANSTON IL 60201
Title	MGR		
Name	EAST, STEVEN		
Address	5300 WEST ATLANTIC BLVD SUITE 201		
City-State-Zip:	DELRAY BEACH FL 33484		

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: STEVEN EAST

CEO

01/25/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date