

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000088933

**Entity Name:** TLCARE OF FLORIDA LLC

**Current Principal Place of Business:**

3610 VICKI DRIVE  
MULBERRY, FL 33860

**Current Mailing Address:**

3610 VICKI DRIVE  
MULBERRY, FL 33860 US

**FEI Number:** 47-4089295

**Certificate of Status Desired:** No

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

WILLIAMS, JAMES MICHAEL DR.  
856 MADISON AVENUE  
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:** JAMES MICHAEL WILLIAMS

04/30/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name JOHNSON, THARON L  
Address 3610 VICKI DRIVE  
City-State-Zip: MULBERRY FL 33860

*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:** THARON JOHNSON

04/30/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date