

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000147712

Entity Name: HAVEN HOSPICE MI, LLC

Current Principal Place of Business:

201 N FRANKLIN ST STE 2000
TAMPA, FL 33602

Current Mailing Address:

201 N FRANKLIN ST STE 2000
TAMPA, FL 33602

FEI Number: 47-5140463

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HESS, TAYLOR R ESQ
201 N FRANKLIN ST STE 2000
TAMPA, FL 33602 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 MGR
Name RUARK, KEVIN
Address 201 N FRANKLIN ST STE 2000
City-State-Zip: TAMPA FL 33602

Title MANAGER
Name RUARK, JAMIN
Address 201 N FRANKLIN ST STE 2000
City-State-Zip: TAMPA FL 33602

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: KEVIN RUARK

CEO

04/19/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date