2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2018
Secretary of State
CC4576446107

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Entity Name: ALTRUISM HOME CARE AGENCY LLC

Current Principal Place of Business:

3031 NE 14TH STREET
GAINESVILLE, FL 32609

Current Mailing Address:

3031 NE 14TH STREET
GAINESVILLE, FL 32609 US

FEI Number: 81-4329337

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DRIVER, GENEVA
3031 NE 14TH STREET
GAINESVILLE, FL 32609 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	OWNER, AUTHORIZED MEMBER, AUTHORIZED REPRESENTATIVE
Name	DRIVER, GENEVA
Address	3031 NE 14TH STREET
City-State-Zip:	GAINESVILLE FL 32609

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: GENEVA DRIVER OWNER/ADMINISTRATOR 04/24/2018

Electronic Signature of Signing Authorized Person(s) Detail — Date