2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 06, 2020
Secretary of State
5643281715CC

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Entity Name: OAKLEAF QUALITY HOMECARE, LLC

Current Principal Place of Business:

5221 SHIRLEY AVENUE
JACKSONVILLE, FL 32210

Current Mailing Address:

5221 SHIRLEY AVENUE
JACKSONVILLE, FL 32210 US

FEI Number: 61-1843610

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HARRIS, EDWINNA S
5221 SHIRLEY AVENUE
JACKSONVILLE, FL 32210 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: EDWINNA S. HARRIS 04/06/2020

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail :

Title	AR	Title	AR
Name	HARRIS, EDWINNA S	Name	WILKERSON, JESSICA L
Address	5221 SHIRLEY AVENUE	Address	8297 OAK CROSSING DRIVE, W
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32244

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: EDWINNA S. HARRIS CO-OWNER 04/06/2020

Electronic Signature of Signing Authorized Person(s) Detail Date