

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000068633

Entity Name: ALTRUIST CARE, LLC

Current Principal Place of Business:

377 MAYA ST
LAKE MARY, FL 32746

Current Mailing Address:

377 MAYA ST
LAKE MARY, FL 32746

FEI Number: 82-1015918

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEBREW, LYNWOOD
377 MAYA ST
LAKE MARY, FL 32746 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 DEBREW, LYNWOOD
Address 377 MAYA ST
City-State-Zip: LAKE MARY FL 32746

Title MGR
Name DEBREW, WILLIE D
Address 377 MAYA ST
City-State-Zip: LAKE MARY FL 32746

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: LYNWOOD DEBREW

MANAGER

03/27/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date