# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000226976

Entity Name: CARTY HEALTHCARE SERVICES LLC

## Current Principal Place of Business:

598 JUNIPER PLACE WELLINGTON, FL 33441

# **Current Mailing Address:**

598 JUNIPER PLACE WELLINGTON, FL 33441 US

# FEI Number: APPLIED FOR

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

CARTY, GAYNEL C 598 JUNIPER PLACE WELLINGTON, FL 33414 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: GAYNEL C CARTY

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title	AMBR
Name	CARTY-SANTIAG, GAYNEL
Address	598 JUNIPER PLACE
City-State-Zip:	WELLINGTON FL 33441

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: CARTY-SANTIAGO, GAYNEL C

ADMINISTRATOR

09/14/2018

Electronic Signature of Signing Authorized Person(s) Detail

## FILED Sep 14, 2018 Secretary of State CC2132781148

Certificate of Status Desired: No

09/14/2018

Date

Date