## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000009840

Entity Name: AJ HEALTHCARE LLC

**Current Principal Place of Business:** 

3549 WATERMARK DR WESLEY CHAPEL, FL 33544

## **Current Mailing Address:**

3549 WATERMARK DR

WESLEY CHAPEL. FL 33544 US

FEI Number: 83-3123704 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LANCASTER, CHRISTINE 3549 WATERMARK DR WESLEY CHAPEL, FL 33544 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

FILED Jan 15, 2024

**Secretary of State** 

1158869126CC

## Authorized Person(s) Detail:

Title MGR

Name LANCASTER, CHRISTINE
Address 3549 WATERMARK DR

City-State-Zip: WESLEY CHAPEL FL 33544

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: LANCASTER, CHRISTINE

**MANAGER** 

01/15/2024