## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000096897

Entity Name: MOXMAN HOME CARE LLC

**Current Principal Place of Business:** 

44 4TH ST SW

WINTER HAVEN, FL 33880

**Current Mailing Address:** 

115 COVINGTON CV SE WINTER HAVEN. FL 33880 US

FEI Number: 83-4437373 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 3030 N. ROCKY POINT DR. STE 150A TAMPA, FL 33607 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 Feb 16, 2021

**Secretary of State** 

3147140273CC

Authorized Person(s) Detail:

Title MGR Title

NameWAKEMAN, BARTNameMOXAM, BRANDONAddress3844 ELOISE ESTATES CTAddress115 COVINGTON CV SECity-State-Zip:WINTER HAVEN FL 33881City-State-Zip:WINTER HAVEN FL 33880

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: BRANDON MOXAM

MGR