

2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L19000118205

Entity Name: COMPASSION CARE TRANSPORTATION LLC

Current Principal Place of Business:

6100 LAKE ELLENOR DR, SUITE 160
ORLANDO, FL 32809

Current Mailing Address:

6100 LAKE ELLENOR DR, SUITE 160
ORLANDO, FL 32809 US

FEI Number: 84-1826292

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOVILAS, ANDERSON
2129 BUCHANAN BAY CIR
APT 105
ORLANDO, FL 32839 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 CEO
Name DOVILAS, ANDERSON
Address 1170 POST LAKE PLACE, APT 108
City-State-Zip: APOPKA FL 32703

Title P
Name ADONIS, COLIMON
Address 5256 LIMELIGHT CIR #3
City-State-Zip: ORLANDO FL 32839

Title VP
Name AUGUSTIN, OBERNE
Address 2500 BAYKAL DR
City-State-Zip: KISSIMMEE FL 34746

Title MG
Name AUGUSTIN, NELDA
Address 2500 BAYKAL DR
City-State-Zip: KISSIMMEE FL 34746

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: ANDERSON DOVILAS

CEO

03/16/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date