

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000260029

**Entity Name:** FIRST COAST CARE, LLC

**Current Principal Place of Business:**

562 VISTA LAKE CIRCLE  
PONTE VEDRA BEACH, FL 32081

**Current Mailing Address:**

562 VISTA LAKE CIRCLE  
PONTE VEDRA BEACH, FL 32081 US

**FEI Number:** 84-3914574

**Certificate of Status Desired:** Yes

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

LUGO, ALEJANDRO  
562 VISTA LAKE CIRCLE  
PONTE VEDRA BEACH, FL 32081 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	Title	CFO
Name	LUGO, MEGHAN	Name	ALEJANDRO, LUGO
Address	562 VISTA LAKE CIRCLE	Address	562 VISTA LAKE CIRCLE
City-State-Zip:	PONTE VEDRA BEACH FL 32081	City-State-Zip:	PONTE VEDRA BEACH FL 32081

*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:** ALEJANDRO LUGO

CFO

06/26/2020

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date