## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000289224

Entity Name: A PATIENT'S CHOICE HOME HEALTH, LLC

**Current Principal Place of Business:** 

1922 SE PORT ST. LUCIE BLVD PORT ST. LUCIE. FL 34952

## **Current Mailing Address:**

1922 SE PORT ST. LUCIE BLVD PORT ST. LUCIE. FL 34952 US

FEI Number: 84-3965500 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HOUGH, GEORGE B 901 SW MARTIN DOWNS BOULEVARD SUITE 316 PALM CITY, FL 34990 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 15, 2022

**Secretary of State** 

5317745372CC

Authorized Person(s) Detail:

Title MGR Title **MANAGER** 

HOUGH, GEORGE B. Name STAMP, MARGARET Name

Address 1981 SE TICKRIDGE ROAD Address 901 SW MARTIN DOWNS BOULEVARD

**SUITE 316** 

City-State-Zip: PORT ST. LUCIE FL 34952 City-State-Zip: PALM CITY FL 34990

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.