

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000265650

**Entity Name:** HEALING AND COMPASSIONATE CARE, LLC

**Current Principal Place of Business:**

168 FOREST VIEW DR  
DAVENPORT, FL 33896

**Current Mailing Address:**

168 FOREST VIEW DR  
DAVENPORT, FL 33896 US

**FEI Number:** 85-2715279

**Certificate of Status Desired:** No

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

MALIVERT, KADIDJA  
168 FOREST VIEW DR  
DAVENPORT, FL 33896 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 MGR  
Name MALIVERT, KADIDJA  
Address 168 FOREST VIEW DR  
City-State-Zip: DAVENPORT FL 33896

*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:** KADIDJA MALIVERT

MGR

03/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date