

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000136162

**Entity Name:** COASTAL BREEZE HOME HEALTH LLC

**Current Principal Place of Business:**

1215 SARASOTA CENTER BLVD  
SARASOTA, FL 34240

**Current Mailing Address:**

1215 SARASOTA CENTER BLVD  
SARASOTA, FL 34240 US

**FEI Number: 86-2873053**

**Certificate of Status Desired: No**

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

DELGADO, YAIMA  
1215 SARASOTA CENTER BLVD  
SARASOTA, FL 34240 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:** YAIMA DELGADO

01/05/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name MAHONEY, SUSAN  
Address 1215 SARASOTA CENTER BLVD  
City-State-Zip: SARASOTA FL 34240

Title MANAGER  
Name DELGADO, YAIMA  
Address 1215 SARASOTA CENTER BLVD  
City-State-Zip: SARASOTA FL 34240

Title MANAGER  
Name VALERO, DAIMARI  
Address 1215 SARASOTA CENTER BLVD  
City-State-Zip: SARASOTA FL 34240

*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:** YAIMA DELGADO

**PRESIDENT**

01/05/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date