

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000159028

Entity Name: PRIORITY LIFE CARE, LLC

Current Principal Place of Business:

1102 CHESTNUT HILLS PARKWAY, SUITE 100
C/O PRIORITY LIFE CARE
FORT WAYNE, FL 46814

Current Mailing Address:

1102 CHESTNUT HILLS PARKWAY, SUITE 100
C/O PRIORITY LIFE CARE
FORT WAYNE, IN 46814 US

FEI Number: 46-2678286

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STARKS, MARK
7320 EAST FLETCHER AVENUE
SUITE 170
TEMPLE TERRACE, FL 33637 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	MANAGER	Title	CFO
Name	PETRAS, ROBERT E. JR	Name	BYERS, IYVONNE
Address	1102 CHESTNUT HILLS PARKWAY, SUITE 100 C/O PRIORITY LIFE CARE	Address	1102 CHESTNUT HILLS PARKWAY
City-State-Zip:	FORT WAYNE IN 46814	City-State-Zip:	FORT WAYNE IN 46814
Title	MANAGER		
Name	PETRAS, SEVERINE M.		
Address	1102 CHESTNUT HILLS PARKWAY, SUITE 100 C/O PRIORITY LIFE CARE		
City-State-Zip:	FORT WAYNE IN 46814		

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: ROBERT E. PETRAS, JR.

MANAGER

01/16/2024

Electronic Signature of Signing Authorized Person(s) Detail Date