

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000376964

**Entity Name:** CREST HOME HEALTH LLC

**Current Principal Place of Business:**

2463 MICHIGAN AVE  
KISSIMMEE, FL 34744

**Current Mailing Address:**

2463 MICHIGAN AVE  
KISSIMMEE, FL 34744 US

**FEI Number:** 87-2308726

**Certificate of Status Desired:** Yes

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

STA MARIA, MARIO  
10605 MOORE RD  
GOTHA, FL 34734 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	Title	MGR
Name	GUZMAN, MINERVA	Name	STA MARIA, MARIO
Address	2527 FOLIO WAY	Address	10605 MOORE RD
City-State-Zip:	KISSIMMEE FL 34741	City-State-Zip:	GOTHA FL 34734
Title	MGR		
Name	BALAJADIA, JASON		
Address	5552 OAKWORTH PLACE		
City-State-Zip:	SANFORD FL 32773		

*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:** MARIO STA MARIA

**CFO**

**04/11/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date