

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000426165

Entity Name: COASTAL NURSING CONCIERGE, LLC

Current Principal Place of Business:

323 HOLMES BLVD. NW
FORT WALTON BEACH, FL 32548

Current Mailing Address:

323 HOLMES BLVD. NW
FORT WALTON BEACH, FL 32548 US

FEI Number: 87-2988931

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRAIG, LINDA
152 BREWER CIRCLE
FORT WALTON BEACH, FL 32569 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: LINDA CRAIG

03/16/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name ADAMS, HEIDI
Address 323 HOLMES BLVD. NW
City-State-Zip: FORT WALTON BEACH FL 32548

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: HEIDI ADAMS

MANAGER

03/16/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date