

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000473852

**Entity Name:** COMER CARE LLC

**Current Principal Place of Business:**

1509 CHEPACKET STREET  
BRANDON, FL 33511

**Current Mailing Address:**

P.O. BOX 367  
BRANDON, FL 33509 US

**FEI Number:** 92-1060742

**Certificate of Status Desired:** Yes

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

COMER, TYSHONDRA  
1509 CHEPACKET STREET  
BRANDON, FL 33511 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	PRES	Title	CEO
Name	COMER, TYSHONDRA	Name	JONES, THEIRA
Address	P.O. BOX 2157	Address	P.O. BOX 367
City-State-Zip:	BRANDON FL 33509	City-State-Zip:	BRANDON FL 33509

*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:** TYSHONDRA COMER

**PRESIDENT/CEO**

**04/29/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date