

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000492141

Entity Name: HOME CARE COLLECTIVE, LLC

Current Principal Place of Business:

9180 GALLERIA COURT, SUITE 700
NAPLES, FL 34109

Current Mailing Address:

9180 GALLERIA COURT, SUITE 700
NAPLES, FL 34109 US

FEI Number: 93-4265584

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEVAN, TINA S
2310 HEYDON CIRCLE WEST
NAPLES, FL 34120 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 AR, CEO
Name PHILLIPS, R.L. KELLY III
Address 10664 LAFAYETTE RD.
City-State-Zip: JOHNSTOWN OH 43031

Title MGR
Name LEVAN, TINA S
Address 2310 HEYDON CIRCLE WEST
City-State-Zip: NAPLES FL 34120

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: R.L. KELLY PHILLIPS III

CEO

02/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date