

**2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1000002872

**Entity Name:** ASCENTIA HOME HEALTH ACQUISITION, LLC

**Current Principal Place of Business:**

51 SOUTH MAIN AVENUE, SUITE 320  
CLEARWATER, FL 33765

**Current Mailing Address:**

51 SOUTH MAIN AVENUE, SUITE 320  
CLEARWATER, FL 33765

**FEI Number:** 27-2913464

**Certificate of Status Desired:** Yes

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

WRIGHT, THADDEUS  
51 SOUTH MAIN AVENUE, SUITE 320  
CLEARWATER, FL 33765 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 MGRM  
Name ASCENTIA HOME HEALTH HOLDING,  
LLC  
Address 51 SOUTH MAIN AVENUE, STE 320  
City-State-Zip: CLEARWATER FL 33765

*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:** THADDEUS WRIGHT

MGRM

01/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date