## 2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000001952

Entity Name: SUMMERWOOD HOME HEALTH SERVICES OF DISTRICT 3,

LLC

# **Current Principal Place of Business:**

2033 MAIN ST SUITE 300 SARASOTA, FL 34237

# **Current Mailing Address:**

2033 MAIN ST SUITE 300 SARASOTA, FL 34237 US

FEI Number: 37-1778961 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CROSS STREET CORPORATE SERVICES LLC 200 S ORANGE AVE SARASOTA, FL 34236 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

**FILED** Mar 19, 2019

**Secretary of State** 

2958437372CC

### Authorized Person(s) Detail:

**ROB GREENE** 

Name PALM HEALTHCARE MANAGEMENT

LLC

SIGNATURE: DEBBIE COMBS

Address 2033 MAIN ST SUITE 300 City-State-Zip: SARASOTA FL 34237

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.

Electronic Signature of Signing Authorized Person(s) Detail

**EXECUTIVE ASSISTANT** 

03/19/2019

Date