

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000003383

**Entity Name:** HEALTHY LIVING HOME MEDICAL LLC

**Current Principal Place of Business:**

26220 ENTERPRISE CT  
LAKE FOREST, CA 92630

**Current Mailing Address:**

26220 ENTERPRISE CT  
LAKE FOREST, CA 92630 US

**FEI Number:** 36-4889962

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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           SOLE MBR  
Name           CPAP SLEEP STORE LLC  
Address        26220 ENTERPRISE CT  
City-State-Zip: LAKE FOREST CA 92630

Title           EVP, CFO  
Name           MORRIS, DEBRA L  
Address        26220 ENTERPRISE CT  
City-State-Zip: LAKE FOREST CA 92630

Title           P  
Name           BAIKIE, JOHN T  
Address        26220 ENTERPRISE CT  
City-State-Zip: LAKE FOREST CA 92630

Title           EVP, GC SEC  
Name           HICKS, MICHAEL-BRYANT .  
Address        7353 COMPANY DRIVE  
City-State-Zip: INDIANAPOLIS IN 46237

Title           DIRECTOR  
Name           STARCK, DANIEL J.  
Address        7353 COMPANY DRIVE  
City-State-Zip: INDIANAPOLIS IN 46237

*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:** MICHAEL-BRYANT HICKS

**EVP, SECRETARY**

**04/30/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date