

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000111943

Entity Name: LIFE CARE MANAGEMENT OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

6874 SO. CONGRESS AVENUE
LANTANA, FL 33462

Current Mailing Address:

6874 SO. CONGRESS AVENUE
LANTANA, FL 33462 UN

FEI Number: 65-1110499

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, MERELINE N
6874 S. CONGRESS AVE.
LANTANA, FL 33462 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

Officer/Director Detail :

Title D
Name BROWN, MERELINE N
Address 6874 S. CONGRESS AVE.
City-State-Zip: LANTANA FL 33462

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MERELINE BROWN

DIRECTOR

02/22/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date