

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000049478

Entity Name: TRANSITIONS FAMILY HEALTH CARE, CORP.

Current Principal Place of Business:

20020 VETERANS BOULEVARD
SUITE 24
PORT CHARLOTTE, FL 33954

Current Mailing Address:

1701 NE 42ND AVE.
SUITE 401
OCALA, FL 34470 US

FEI Number: 80-0639207

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YURASKO, ANDY
1701 NE 42ND AVE STE 401
OCALA, FL 34479 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: ANDY YURASKO

04/29/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title MGR
Name KLEIN, ESTHER
Address 311 WALLABOUT ST
City-State-Zip: BROOKLYN NY 11206

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: ESTHER KLEIN

MGR

04/29/2023

Electronic Signature of Signing Officer/Director Detail

Date