

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000020874

**FILED  
Apr 01, 2015  
Secretary of State  
CC6138701703**

**Entity Name:** KERR NURSING SERVICES INC

**Current Principal Place of Business:**

1231 VIRGINIA AVE  
CLEWISTON, FL 33440

**Current Mailing Address:**

PO BOX 1869  
CLEWISTON, FL 33440 US

**FEI Number:** 46-5070754

**Certificate of Status Desired:** No

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

JC TAX SOLUTIONS CORP  
1100 N MAIN ST  
103  
BELLE GLADE, FL 33440 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	P, VP	Title	T, S
Name	KERR, CEMANTHY	Name	KERR, CEMANTHY
Address	1231 VIRGINIA AVE	Address	1231 VIRGINIA AVE
City-State-Zip:	CLEWISTON FL 33440	City-State-Zip:	CLEWISTON FL 33440

*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:** CEMANTHY KERR

**PRESIDENT**

**04/01/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date