

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000006422

**Entity Name:** COMPREHENSIVE HOME CARE OF PALM BEACH, LLC

**Current Principal Place of Business:**

6450 NW 5TH WAY  
FT. LAUDERDALE,, FL 33309

**Current Mailing Address:**

6450 NW 5TH WAY  
FT. LAUDERDALE,, FL 33309 US

**FEI Number: 56-2324896**

**Certificate of Status Desired: No**

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

MOSKOWITZ, MICHAEL W ESQ  
MOSKOWITZ, MANDELL, SALIM & SIMOWITZ, PA  
800 CORPORATE DR - STE 500  
FT LAUDERDALE, FL 33334 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:** MICHAEL W MOSKIWITZ

01/06/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name BRAGG, GARRETT W  
Address 6450 NW 5TH WAY  
City-State-Zip: FT. LAUDERDALE, FL 33309

*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:** GARRETT W. BRAGG

**MANAGER**

01/06/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date