

2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000032680

Entity Name: CLINICARE OF BROWARD, LLC

Current Principal Place of Business:

1175 SO. US HIGHWAY 1
2ND FLOOR
VERO BEACH, FL 32962

Current Mailing Address:

1175 SO. US HIGHWAY 1
2ND FLOOR
VERO BEACH, FL 32962 US

FEI Number: 52-2406640

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREENSPOON MARDER, P.A.
200 E. BROWARD BLVD.
SUITE 1800
FORT LAUDERDALE, FL 33301 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: GREGORY J. BLODIG

01/05/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR, CEO, SEC
Name TERESI, TONI
Address 1175 SO. US HIGHWAY 1
2ND FLOOR
City-State-Zip: VERO BEACH FL 32962

Title MGR, CHAIRMAN, TREASURER
Name JANKE, WALTER
Address 1175 SO. US HIGHWAY 1
2ND FLOOR
City-State-Zip: VERO BEACH FL 32962

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: WALTER JANKE

MANAGER

01/05/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date