

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032680

Entity Name: CLINICARE OF BROWARD, LLC

Current Principal Place of Business:

9960 CENTRAL PARK BLVD N
SUITE 450
BOCA RATON, FL 33428

Current Mailing Address:

9960 CENTRAL PARK BLVD N
SUITE 450
BOCA RATON, FL 33428

FEI Number: 52-2406640

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLY, LORI B
9960 CENTRAL PARK BLVD N
SUITE 450
BOCA RATON, FL 33428 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: LORI B KELLY

01/06/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name KELLY, LORI B
Address 9960 CENTRAL PARK BLVD N, SUITE
450
City-State-Zip: BOCA RATON FL 33428

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: LORI B. KELLY

MANAGER

01/06/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date