

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000055228

**Entity Name:** COMFORT & CARE OF TAMPA BAY , LLC

**Current Principal Place of Business:**

200 CENTRAL AVE  
ONE PROGRESS PLAZA 3RD FLOOR  
ST PETERSBURG, FL 33701

**Current Mailing Address:**

PO BOX 2134  
#302  
ST PETERSBURG, FL 33731 US

**FEI Number:** 26-2748256

**Certificate of Status Desired:** No

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

KOUZMOVA, SVETLANA  
2820 GRAPHITE CT  
VALRICO, FL 33594 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

**Authorized Person(s) Detail :**

Title MGRM  
Name KRIKSHTANAS, SAVERINAS  
Address 200 CENTRAL AVE  
ONE PROGRESS PLAZA 3RD FLOOR  
City-State-Zip: ST PETERSBURG FL 33701

*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:** SAVERINAS KRIKSHTANAS

MGRM

04/30/2019

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date