

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000138844

Entity Name: FIRST CHOICE HOME HEALTH CARE, LLC

Current Principal Place of Business:

200 FRANDORSON CIRCLE
203
APOLLO BEACH, FL 33572

Current Mailing Address:

200 FRANDORSON CIRCLE
203
APOLLO BEACH, FL 33572

FEI Number: 45-4034312

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOSEPH, SIAM J
618 US HIGHWAY 1
SUITE 401
NORTH PALM BEACH, FL 33408 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 JOSEPH, GLENN
Address 1850 HOMEWOOD BLVD., #101
City-State-Zip: DELRAY BEACH FL 33445

Title MANAGER
Name JOSEPH, KETURAH
Address 200 FRANDORSON CIRCLE
203
City-State-Zip: APOLLO BEACH FL 33572

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: KETURAH JOSEPH

MANAGER

04/04/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date