

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000078661

Entity Name: COMPREHENSIVE HOME CARE OF POLK, LLC

Current Principal Place of Business:

373 E. CENTRAL AVE
WINTER HAVEN, FL 33880

Current Mailing Address:

6450 NW 5TH WAY
FT. LAUDERDALE, FL 33309

FEI Number: 05-0554156

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOSKOWITZ, MICHAEL W
800 CORPORATE DRIVE
SUITE 500
FORT 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. MOSKOWITZ

03/09/2016

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

03/09/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date