

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000054298

**FILED
Mar 12, 2019
Secretary of State
7041991721CC**

Entity Name: RADCLIFFE NURSING SERVICE LLC

Current Principal Place of Business:

4723 W ATLANTIC AVE A-9
DELRAY BEACH, FL 33445

Current Mailing Address:

4723 W ATLANTIC AVE A-9
DELRAY BEACH, FL 33445 US

FEI Number: 46-5285818

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCALLUM, RADCLIFFE ORAL
4723 W ATLANTIC AVE A-9
DELRAY BEACH, FL 33445 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: RADCLIFFE MCCALLUM

03/12/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT
Name MCCALLUM, RADCLIFFE
Address 4723 W ATLANTIC AVE A-9
City-State-Zip: DELRAY BEACH FL 33445

Title VP
Name LEWIS, MELISSA
Address 4723 W ATLANTIC AVE A-9
City-State-Zip: DELRAY BEACH FL 33444

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: RADCLIFFE MCCALLUM

PRESIDENT

03/12/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date