

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000151225

**Entity Name:** TRUCARE HOME HEALTH SOLUTIONS LLC

**Current Principal Place of Business:**

1933 E. EDGEWOOD DR  
SUITE 102  
LAKELAND, FL 33803

**Current Mailing Address:**

1933 E. EDGEWOOD DR  
SUITE 102  
LAKELAND, FL 33803 US

**FEI Number:** 47-1950328

**Certificate of Status Desired:** No

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

JENNIFER, TAURO  
1933 E. EDGEWOOD DR  
SUITE 102  
LAKELAND, FL 33803 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:** JENNIFER TAURO

04/28/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name TAURO, JENNIFER  
Address 1933 E. EDGEWOOD DR  
SUITE 102  
City-State-Zip: LAKELAND FL 33803

*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:** JENNIFER TAURO

MANAGER

04/28/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date