

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000050786

Entity Name: ST. THOMAS CARE PLUS, LLC

Current Principal Place of Business:

7056 MARINER BOULEVARD
SPRING HILL, FL 34609

Current Mailing Address:

7056 MARINER BOULEVARD
SPRING HILL, FL 34609

FEI Number: 81-1890150

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DRUMMOND, TEMPLE H ESQ.
DRUMMOND WEHLE LLP
6987 EAST FLOWERL AVENUE
TAMPA, FL 33617 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 MGR
Name ABSKHROUN, HANY
Address 7056 MARINER BOULEVARD
City-State-Zip: SPRING HILL FL 34609

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: HANY ABSKHROUN

OWNER

04/07/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date