2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 28, 2017
Secretary of State
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Entity Name: ANGEL PREFERRED HOME CARE, LLC

Current Principal Place of Business:

501 GOODLETTE RD N SUITE D-100
NAPLES, FL 34102

Current Mailing Address:

501 GOODLETTE RD N SUITE D-100
NAPLES, FL 34102 US

FEI Number: 81-2116076

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THERESIAS, WILFRID
202 POTOMAC PLACE
NAPLES, FL 34112 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	AMBR	Title	AMBR
Name	THERESIAS, WILFRID	Name	THERESIAS, KETLY
Address	202 POTOMAC PLACE	Address	202 POTOMAC PLACE
City-State-Zip:	NAPLES FL 34112	City-State-Zip:	NAPLES FL 34112

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: WILFRID THERESIAS OWNER 02/28/2017

Electronic Signature of Signing Authorized Person(s) Detail — Date