

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000188000

Entity Name: HOME HEALTH BROOKSPTA, LLC

Current Principal Place of Business:

5432 54TH WAY
WEST PALM BEACH, FL 33409

Current Mailing Address:

5432 54TH WAY
WEST PALM BEACH, FL 33409

FEI Number: 00-0000000

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOTZ, SHIRLEY
2132 E CAROL CIRCLE
WEST PALM BEACH, FL 33415 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: SHIRLEY LOTZ

02/11/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name BROOKS, MICHELLE D
Address 5432 54TH WAY
City-State-Zip: WEST PALM BEACH FL 33409

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: MICHELLE D BROOKS

PRESIDENT

02/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date