## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000107911

Entity Name: MINISTERING ANGEL'S OF COMPASSION HOME HEALTH

CARE SERVICES LLC

## **Current Principal Place of Business:**

8206 LOCH LOMOND LN. JACKSONVILLE, FL 32244

**Current Mailing Address:** 

8206 LOCH LOMOND LN. JACKSONVILLE, FL 32244 US

FEI Number: 26-1151512 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LECOUNT, DINAH M 8206 LOCH LOMOND LN. JACKSONVILLE, FL 32244 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

FILED Mar 03, 2020

**Secretary of State** 

3726947714CC

## Authorized Person(s) Detail:

Title OWNR

Name LECOUNT, DINAH M

Address 8206 LOCH LOMOND LN.

City-State-Zip: JACKSONVILLE FL 32244

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: DINAH LECOUNT

OWNER 03/03/2020

Date