

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000096897

Entity Name: MOXMAN HOME CARE LLC

Current Principal Place of Business:

44 4TH ST SW
WINTER HAVEN, FL 33880

Current Mailing Address:

115 COVINGTON CV SE
WINTER HAVEN, FL 33880 US

FEI Number: 83-4437373

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOXAM, BRANDON
115 COVINGTON CV SE
WINTER HAVEN, FL 33880 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: BRANDON MOXAM

03/05/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name WAKEMAN, BART
Address 59 HARBOUR ESTATES DR
City-State-Zip: WINTER HAVEN FL 33884

Title MGR
Name MOXAM, BRANDON
Address 115 COVINGTON CV SE
City-State-Zip: WINTER HAVEN FL 33880

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: BRANDON MOXAM

MANAGER/MEMBER

03/05/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date