

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000381609

Entity Name: KATHLEEN A LANE CARE LLC

Current Principal Place of Business:

2629 NORTHWEST 41ST STREET
BOCA RATON, FL 33434

Current Mailing Address:

2629 NORTHWEST 41ST STREET
BOCA RATON, FL 33434 US

FEI Number: 88-4056325

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LANE, KATHLEEN A
2629 NORTHWEST 41ST STREET
BOCA RATON, FL 33434 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 CEO
Name LANE, KATHLEEN A
Address 2629 NORTHWEST 41ST STREET
City-State-Zip: BOCA RATON FL 33434

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: KATHLEEN LANE

CEO

01/23/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date