

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000093107

**Entity Name:** ARC HOSPICE OF FLORIDA, LLC

**Current Principal Place of Business:**

2400 E. COMMERCIAL BOULEVARD  
905  
FORT LAUDERDALE, FL 33308

**Current Mailing Address:**

100 CHALLENGER ROAD  
105  
RIDGEFIELD PARK, NJ 07660

**FEI Number:** 92-3151060

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PANZA MAURER & MAYNARD, P.A.  
2400 E. COMMERCIAL BOULEVARD  
905  
FORT LAUDERDALE, FL 33308 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 MGR  
Name GLICK, DAVID  
Address 2870 STIRLING ROAD, SUITE 201  
City-State-Zip: HOLLYWOOD FL 33020

Title CFO  
Name AVRAHAM, VAIL  
Address 2870 STIRLING ROAD, SUITE 201  
City-State-Zip: HOLLYWOOD FL 33020

*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:** AVRAHAM VAIL

CFO

04/02/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date