

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000003703

Entity Name: PALM GARDEN OF WEST PALM BEACH, LLC

Current Principal Place of Business:

2033 MAIN STREET
SUITE 302
SARASOTA, FL 34237

Current Mailing Address:

2033 MAIN STREET
SUITE 302
SARASOTA, FL 34237 US

FEI Number: 38-3911899

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROSS STREET CORPORATE SERVICES, LLC
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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 PALM HEALTHCARE MANAGEMENT,
LLC
Address 2033 MAIN STREET, SUITE 300
City-State-Zip: SARASOTA FL 34237

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: MORRIS H. MILLER

**PRESIDENT & CEO, PALM 04/28/2014
HEALTHCARE
MANAGEMENT, LLC, AS
MANAGER**

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date