

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F93000002666

**Entity Name:** LONG TERM PREFERRED CARE, INC.

**Current Principal Place of Business:**

400 DUKE DR  
FRANKLIN, TN 37067

**Current Mailing Address:**

400 DUKE DRIVE  
FRANKLIN, TN 37067 US

**FEI Number:** 62-145251

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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

**Officer/Director Detail :**

Title            CEO  
Name            SIEGEL, TODD H  
Address        6 HIGH RIDGE PARK  
City-State-Zip: STAMFORD CT 06905

Title            VP  
Name            DUDACEK , ROBERT J  
Address        400 DUKE DRIVE  
City-State-Zip: FRANKLIN TN 37067

Title            VP  
Name            PRESTON , PORTER  
Address        400 DUKE DRIVE  
City-State-Zip: FRANKIN TN 37067

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT DUDACEK

**PRESIDENT, INSUARNCE    02/29/2016**  
**SALES**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date