

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000275544

Entity Name: HTI NURSING NEGLIGENCE AND LIFE CARE PLANNING LLC

Current Principal Place of Business:

1379 LANSLOWNE AVENUE
ORANGE CITY, FL 32763

Current Mailing Address:

1379 LANSLOWNE AVENUE
ORANGE CITY, FL 32763 US

FEI Number: 87-1205415

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROCK, PATRICIA
1379 LANSLOWNE AVENUE
ORANGE CITY, FL 32763 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 AMBR
Name BROCK, PATRICIA
Address 1379 LANSLOWNE AVENUE
City-State-Zip: ORANGE CITY FL 32763

Title AMBR
Name BROCK, RAY
Address 1379 LANSLOWNE AVENUE
City-State-Zip: ORANGE CITY FL 32763

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: PATRICIA BROCK

AMBR

04/20/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date