2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710065

Entity Name: GARDEN MANOR OF NAPLES, INC.

FILED
Apr 12, 2023
Secretary of State
7665638472CC

Current Principal Place of Business:

C/O SUNBURST MANAGEMENT CORP 2675 S. HORSESHOE DR #401 NAPLES, FL 34104

Current Mailing Address:

C/O SUNBURST MANAGEMENT CORP 2675 S. HORSESHOE DR #401 NAPLES, FL 34104 US

FEI Number: 59-1583708 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SUNBURST MANAGEMENT CORP. C/O SUNBURST MANAGEMENT CORP 2675 S. HORSESHOE DR #401 NAPLES, FL 34104 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: BEVERLY KUETER 04/12/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name WHITE, SCOTT Name COHEN, BRUCE

Address C/O SUNBURST MANAGEMENT CORP Address C/O SUNBURST MANAGEMENT CORP

2675 S. HORSESHOE DR #401 2675 S. HORSESHOE DR #401

City-State-Zip: NAPLES FL 34104 City-State-Zip: NAPLES FL 34104

Title TREASURER Title SECRETARY

Name JONES, MICHAEL Name TEMPLEMAN, DONNA

Address C/O SUNBURST MANAGEMENT CORP Address C/O SUNBURST MANAGEMENT CORP

2675 S. HORSESHOE DR #401 2675 S. HORSESHOE DR #401

City-State-Zip: NAPLES FL 34104 City-State-Zip: NAPLES FL 34104

Title DIRECTOR

Name ROTHENBERG, KYLE

Address C/O SUNBURST MANAGEMENT CORP

2675 S. HORSESHOE DR #401

City-State-Zip: NAPLES FL 34104

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SCOTT WHITE PRESIDENT 04/12/2023