

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06529

Entity Name: FLORIDA SENIOR LIVING INSTITUTE, INC.

Current Principal Place of Business:

2292 WEDNESDAY STREET
SUITE 1
TALLAHASSEE, FL 32308

Current Mailing Address:

2292 WEDNESDAY STREET
SUITE 1
TALLAHASSEE, FL 32308 US

FEI Number: 59-2522623

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATILLO, GAIL CEO
2292 WEDNESDAY STREET
SUITE 1
TALLAHASSEE, FL 32308 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: GAIL MATILLO

04/01/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name SHUCK, RONALD R
Address 7512 DR. PHILLIPS BLVD
STE 50-939
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR
Name NEASE, MARIAN
Address 2650 N. MILITARY TRAIL
STE 240
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name THIBAUT, GWEN
Address 2292 WEDNESDAY STREET
SUITE 1
City-State-Zip: TALLAHASSEE FL 32308

Title PRESIDENT
Name MATILLO, GAIL
Address 2292 WEDNESDAY STREET
SUITE 1
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name PATCHETT, MARY SUE
Address 111 WESTWOOD PLACE
SUITE 400
City-State-Zip: BRENTWOOD TN 37027

Title DIRECTOR
Name SKIRVIN, MELINDA
Address 2701 NORTH COURSE DRIVE
City-State-Zip: POMPANO BEACH FL 33069

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: GAIL MATILLO

PRESIDENT

04/01/2021

Electronic Signature of Signing Officer/Director Detail

Date