

2020 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06529

FILED
Nov 09, 2020
Secretary of State
8455507040CR

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: Yes

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

11/09/2020

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

CEO

11/09/2020

Electronic Signature of Signing Officer/Director Detail

Date