2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2018
Secretary of State
CC5608926085

DOCUMENT# N09000009840

Entity Name: SUNSHINE MEADOWS ASSISTED LIVING FACILITY, INC.

Current Principal Place of Business:

1809 18TH STREET
SARASOTA, FL 34234

Current Mailing Address:

1809 18TH STREET
SARASOTA, FL 34234

FEI Number: 27-1096668

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUMBRAY, GEORGE
2744 20TH STREET
SARASOTA, FL 34234 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	DIRECTOR, SECRETARY, TREASUER	Title	CHAIRMAN
Name	BROWN, JAMES C	Name	BUMBRAY, GEORGE
Address	2439 WALKER	Address	1809 18TH STREET
City-State-Zip:	SARASOTA FL 34234	City-State-Zip:	SARASOTA FL 34234
Title	DIRECTOR	Title	EXECUTIVE DIRECTOR
Name	PHILLIPS, ALBERT REV.	Name	MACK, VICKE ANNE
Address	1707TARPON AVE.	Address	1809 18TH STREET
City-State-Zip:	SARASOTA FL 34234	City-State-Zip:	SARASOTA FL 34234

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: VICKE MACK EXECUTIVE DIRECTOR 03/09/2018

Electronic Signature of Signing Officer/Director Detail — Date