2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2016
Secretary of State
CC4899355189

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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: Yes

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	D, VP
Name	ATKINS, GWENDOLYN
Address	2415 N. TUTTLE
City-State-Zip:	SARASOTA FL 34234

Title	DST
Name	BROWN, JAMES C
Address	2439 WALKER
City-State-Zip:	SARASOTA FL 34234

Title	P
Name	BUMBRAY, GEORGE
Address	1809 18TH STREET
City-State-Zip:	SARASOTA FL 34234

Title	D
Name	WILLIAMS, FREDERICK D
Address	1809 18TH STREET
City-State-Zip:	SARASOTA FL 34234

Title	D
Name	PHILLIPS, ALBERT REV.
Address	1707TARPON AVE.
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: GEORGE BUMBRAY — CHAIRMAN OF THE BOARD — 03/17/2016

Electronic Signature of Signing Officer/Director Detail — Date