| JACKSONVILLE, FL 32217 | | | | |
|--|--|-----------------|--|--------------------|
| Current Mailing Address: | | | | |
| 6601 CHES JACKSONV | FER AVE. LLE, FL 32217 US | | | |
| FEI Number: 59-2777638 | | | Certificate of Status Desired: Yes | |
| Name and Address of Current Registered Agent: | | | | |
| HOECKELBER 6601 CHESTEF JACKSONVILL | | | | |
| 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 | : DEBORAH HOECKELBERG | | | 00/00/0000 |
| | DEBUKAN NUEUKELBERG | | | 03/22/2023 |
| | Electronic Signature of Registered Agent | | | 03/22/2023 Date |
| Officer/Dire | Electronic Signature of Registered Agent | | | |
| Officer/Dire Title | Electronic Signature of Registered Agent | Title | SECRETARY/TREASURER | |
| | Electronic Signature of Registered Agent | Title Name | SECRETARY/TREASURER HOECKELBERG, DEBORAH | |
| Title | Electronic Signature of Registered Agent ctor Detail : P | | | |
| Title Name | Electronic Signature of Registered Agent ctor Detail : P BARBER, JOHN W JR 2900 STATE ROAD 13 | Name | HOECKELBERG, DEBORAH 4950 MOTOR YACHT DRIVE | |
| Title Name Address | Electronic Signature of Registered Agent ctor Detail : P BARBER, JOHN W JR 2900 STATE ROAD 13 | Name Address | HOECKELBERG, DEBORAH 4950 MOTOR YACHT DRIVE | |
| Title Name Address City-State-Zip: | Electronic Signature of Registered Agent ctor Detail : P BARBER, JOHN W JR 2900 STATE ROAD 13 JACKSONVILLE FL 32259 | Name Address | HOECKELBERG, DEBORAH 4950 MOTOR YACHT DRIVE | |
| Title Name Address City-State-Zip: Title | Electronic Signature of Registered Agent ctor Detail : P BARBER, JOHN W JR 2900 STATE ROAD 13 JACKSONVILLE FL 32259 VP | Name Address | HOECKELBERG, DEBORAH 4950 MOTOR YACHT DRIVE | |

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: THE FANNIE E. TAYLOR HOME FOR THE AGED-TAYLOR

DOCUMENT# N13104

Current Principal Place of Business:

MANOR INC.

6605 CHESTER AVE.

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.

Electronic Signature of Signing Officer/Director Detail

C.E.O

FILED Mar 22, 2023

Secretary of State

2665395184CC