

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000052759

**Entity Name:** CLEMENT SMITH ADULT FAMILY CARE HOME INC.

**Current Principal Place of Business:**

18377 WINSOME AVENUE  
PORT CHARLOTTE, FL 33948

**Current Mailing Address:**

18377 WINSOME AVENUE  
PORT CHARLOTTE, FL 33948 US

**FEI Number:** 30-0005275

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SMITH, CLEMENT G  
18377 WINSOME AVENUE  
PORT CHARLOTTE, FL 33948 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:** CLEMENT G SMITH

03/20/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name SMITH, CLEMENT G  
Address 20236 PEACHLAND BLVD  
City-State-Zip: PORT CHARLOTTE FL 33954

Title SV  
Name SMITH, YANICK B  
Address 18377 WINSOME AVENUE  
City-State-Zip: PORT CHARLOTTE FL 33948

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CLEMENT SMITH

OWNER

03/20/2020

Electronic Signature of Signing Officer/Director Detail

Date