## **2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000029376

Entity Name: ARBOR FACILITY INC

**Current Principal Place of Business:** 

490 S. OLD WIRE ROAD WILDWOOD. FL 34785-5001

**Current Mailing Address:** 

490 S. OLD WIRE ROAD WILDWOOD. FL 34785-5001 US

FEI Number: 47-3593367 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 490 S. OLD WIRE ROAD WILDWOOD, FL 34785-5001 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

FILED Apr 28, 2021

**Secretary of State** 

0038572634CC

## Officer/Director Detail:

Title DIRECTOR

Name OLD WIRE ROAD CARE INC
Address 368 NEW HEMPSTEAD RD

**SUITE 321** 

City-State-Zip: NEW HEMPSTEAD NY 10977

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: OLD WIRE ROAD CARE INC

**DIRECTOR** 

04/28/2021

Electronic Signature of Signing Officer/Director Detail

Date