

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000088884

Entity Name: WINDERMERE MEMORY CARE, INC.

Current Principal Place of Business:

7901 KIPLING STREET
PENSACOLA, FL 32514

Current Mailing Address:

7901 KIPLING STREET
PENSACOLA, FL 32514 US

FEI Number: 47-5458169

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARRIS, CASIE
7901 KIPLING STREET
PENSACOLA, FL 32514 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 DPST
Name HARRIS, CASIE
Address 7901 KIPLING STREET
City-State-Zip: PENSACOLA FL 32514

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: CASIE HARRIS

OWNER/CEO

01/20/2017

Electronic Signature of Signing Officer/Director Detail

Date