

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000089116

**Entity Name:** SENIOR LIVING SPECIALTIES, INC.

**Current Principal Place of Business:**

13923 ICOT BLVD  
STE 815  
CLEARWATER, FL 33760

**Current Mailing Address:**

13923 ICOT BLVD  
STE 815  
CLEARWATER, FL 33760 US

**FEI Number:** 65-0870548

**Certificate of Status Desired:** No

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

SEXTON, TONI  
13923 ICOT BLVD  
STE 815  
CLEARWATER, FL 33760 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 PD  
Name SEXTON, TONI  
Address 13923 ICOT BLVD  
STE 815  
City-State-Zip: CLEARWATER FL 33760

*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:** TONI SEXTON

CEO

01/12/2021

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date