

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000089116

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

**Current Principal Place of Business:**

10901 CORPORATE CIR., N, STE A  
ST. PETERSBURG, FL 33713

**Current Mailing Address:**

10901 CORPORATE CIR., N, STE A  
ST. PETERSBURG, FL 33713

**FEI Number:** 65-0870548

**Certificate of Status Desired:** No

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

SEXTON, TONI  
10901 CORPORATE CIRCLE N  
STE A  
SAINT PETERSBURG, FL 33716 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 10901 CORPORATE CIRCLE N STE A  
City-State-Zip: SAINT PETERSBURG FL 33716

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

PD

01/08/2017

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

\_\_\_\_\_  
Date