| REG A<br>IUE EAST<br>285 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. |  |  |  |
| GREG A. ANDERSON   |  |  | 02/22/2019   |
| Electronic Signature of Registered Agent   |  |  | Date   |
| Authorized Person(s) Detail :  |  |  |  |
| MGR  | Title  | MGR  |  |
| ANDERSON, GREG   | Name   | ANDERSON, BRANDON  |  |
| 100 BASE AVENUE EAST   | Address  | 100 BASE AVENUE EAST   |  |
| VENICE FL 34285  | City-State-Zip:  | VENICE FL 34285  |  |
| MGR  |  |  |  |
| LABELL, AMANDA   |  |  |  |
| 100 BASE AVENUE EAST   |  |  |  |
| VENICE FL 34285  |  |  |  |
|  | EG A<br>UE EAST<br>85 US<br>entity submits this statement for the purpose of changing its regist<br>GREG A. ANDERSON<br>Electronic Signature of Registered Agent<br>erson(s) Detail :<br>MGR<br>ANDERSON, GREG<br>100 BASE AVENUE EAST<br>VENICE FL 34285<br>MGR<br>LABELL, AMANDA<br>100 BASE AVENUE EAST | EG A<br>UE EAST<br>85 US<br>entity submits this statement for the purpose of changing its registered office or regist<br>GREG A. ANDERSON<br>Electronic Signature of Registered Agent<br>erson(s) Detail :<br>MGR Title<br>ANDERSON, GREG Name<br>100 BASE AVENUE EAST Address<br>VENICE FL 34285 City-State-Zip:<br>MGR<br>LABELL, AMANDA<br>100 BASE AVENUE EAST | EG A<br>UE EAST<br>85 US<br>entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of File<br>GREG A. ANDERSON<br>Electronic Signature of Registered Agent<br>erson(s) Detail :<br>MGR Title MGR<br>ANDERSON, GREG Name ANDERSON, BRANDON<br>100 BASE AVENUE EAST Address 100 BASE AVENUE EAST<br>VENICE FL 34285 City-State-Zip: VENICE FL 34285<br>MGR<br>LABELL, AMANDA<br>100 BASE AVENUE EAST |

**Current Mailing Address:** 

100 BASE AVENUE EAST VENICE, FL 34285

100 BASE AVENUE EAST VENICE, FL 34285 US

# FEI Number: 26-0399195

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

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GREG ANDERSON

Electronic Signature of Signing Authorized Person(s) Detail

### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000064957

Entity Name: A BANYAN RESIDENCE ASSISTED LIVING, LLC

## **Current Principal Place of Business:**

Feb 22, 2019 Secretary of State 6126081316CC

FILED

Certificate of Status Desired: No

MGR