## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000004855

Entity Name: D'S ASSISTED LIVING FACILITY, LLC

Current Principal Place of Business:

1812 SAXON BLVD. DELTONA. FL 32725

**Current Mailing Address:** 

104 ELISSAR DRIVE DEBARY, FL 32713

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FORTOUL, MAURICE 104 ELISSAR DRIVE DEBARY, FL 32713 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 Feb 21, 2014

**Secretary of State** 

CC4522530273

Authorized Person(s) Detail:

Title MGR Title MGR

NameMARTINEZ, VICTORNameMARTINEZ, LINA GAddress104 ELISSAR DRIVEAddress104 ELISSAR DRIVECity-State-Zip:DEBARY FL 32713City-State-Zip:DEBARY FL 32713

Title MANAGER

Name FORTOUL, MAURICE
Address 13961 SW 82 STREET
City-State-Zip: MIAMI FL 33183

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: VICTOR MARTINEZ

**MGR** 

02/21/2014