

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000068263

**Entity Name:** COMPASSIONATE DOWNSIZING 4 SENIORS, LLC

**Current Principal Place of Business:**

1320 CORBETT LANE  
WEST MELBOURNE, FL 32904

**Current Mailing Address:**

1320 CORBETT LANE  
WEST MELBOURNE, FL 32904 US

**FEI Number:** 46-5521920

**Certificate of Status Desired:** Yes

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

NEALE, CAROLYN J  
1320 CORBETT LANE  
WEST MELBOURNE, FL 32904 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

**Authorized Person(s) Detail :**

Title MGR  
Name NEALE, CAROLYN J  
Address 1320 CORBETT LANE  
City-State-Zip: WEST MELBOURNE FL 32904

Title MGR  
Name JONES, DONNA K  
Address 890 LUMINARY CIRCLE  
UNIT 101  
City-State-Zip: MELBOURNE FL 32901

*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:** CAROLYN J NEALE

**MANAGER**

**03/31/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date