DOCUMENT# L15000079040	Feb 21, 2019
Entity Name: TARPON SPRINGS ASSISTED LIVING AT WALTON PLACE, LLC	Secretary of Stat 0087679944CC
Current Principal Place of Business: 5901 US HWY. 19 7	000707994400
NEW PORT RICHEY, FL 34652	
Current Mailing Address:	
5901 US HWY. 19	
NEW PORT RICHEY, FL 34652 US	
FEI Number: 47-3971752 Certificate	of Status Desired: No
Name and Address of Current Registered Agent:	
BURNARD, MARY A 5901 US HWY. 19	
7 NEW PORT RICHEY, FL 34652 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	E: MARY A BURNARD			02/21/2019	
	Electronic Signature of Registered Agent			Date	
Authorized	Authorized Person(s) Detail :				
Title	AMBR	Title	AMBR		
Name	BURNARD, HARRY	Name	BURNARD, MARY A		
Address	5901 US HWY. 19, SUITE 7	Address	5901 US HWY. 19, SUITE 7		
City-State-Zip:	NEW PORT RICHEY FL 34652	City-State-Zip:	NEW PORT RICHEY FL 34652	2	
Title	MGR	Title	MGR		
Name	BURNARD, HARRY	Name	BURNARD, MARY A		
Address	5901 US HWY. 19, SUITE 7	Address	5901 US HWY. 19, SUITE 7		
City-State-Zip:	NEW PORT RICHEY FL 34652	City-State-Zip:	NEW PORT RICHEY FL 3465	2	

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.

AMBR

## SIGNATURE: MARY A BURNARD

Electronic Signature of Signing Authorized Person(s) Detail

## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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