2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000079040

Entity Name: TARPON SPRINGS ASSISTED LIVING AT WALTON PLACE, LLC

FILED Mar 28, 2024 **Secretary of State** 6052923969CC

Current Principal Place of Business:

5901 US HWY. 19

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

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: MARY A BURNARD 03/28/2024

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **MANAGER** Title **MANAGER**

Name BURNARD, HARRY Name BURNARD, MARY A

5901 US HWY. 19, SUITE 7 5901 US HWY. 19, SUITE 7 Address Address City-State-Zip: NEW PORT RICHEY FL 34652 NEW PORT RICHEY FL 34652 City-State-Zip:

Title MGR Title MGR

BURNARD, HARRY Name BURNARD, MARY A Name

Address 5901 US HWY. 19, SUITE 7 Address 5901 US HWY. 19, SUITE 7 City-State-Zip: NEW PORT RICHEY FL 34652 NEW PORT RICHEY FL 34652 City-State-Zip:

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.