

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000155327

Entity Name: IMATTER ADULT DAY CENTER, LLC

Current Principal Place of Business:

3427 WEST WOOLBRIGHT RD
BOYNTON BEACH, FL 33063

Current Mailing Address:

3427 WEST WOOLBRIGHT RD.
BOYNTON BEACH, FL 33436 US

FEI Number: 47-5099326

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRENNAN, ALVIN L
11936 DOVER VILLAGE DR W
JACKSONVILLE, FL 32220 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 BRENNAN, ANDRAYA J
Address 3427 WEST WOOLBRIGHT RD.
City-State-Zip: BOYNTON BEACH FL 33436

Title MGR
Name BRENNAN, ALVIN L
Address 3427 WEST WOOLBRIGHT RD.
City-State-Zip: BOYNTON BEACH FL 33436

Title AMBR
Name BRENNAN, TAYLOR
Address 1520 SW CALIFORNIA BLVD
City-State-Zip: PORT SAINT LUCIE FL 34953

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: ANDRAYA BRENNAN

CEO

02/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date