

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000079025

Entity Name: ACTIVE ADULT CARE LLC

Current Principal Place of Business:

15942 TERNGLADE DRIVE
LITHIA, FL 33547

Current Mailing Address:

15942 TERNGLADE DRIVE
LITHIA, FL 33547 UN

FEI Number: 81-2339218

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALUR, CLAUDIA P
15942 TERNGLADE DRIVE
LITHIA, FL 33547 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 ALUR, CLAUDIA P
Address 15942 TERNGLADE DRIVE
City-State-Zip: LITHIA FL 33547

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: CLAUDIA ALUR

MANAGER

02/07/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date