

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000216929

Entity Name: SERENITY POINTE ALF, LLC

Current Principal Place of Business:

3891 HAMMOCK BLUFF DRIVE
JACKSONVILLE, FL 32226

Current Mailing Address:

3891 HAMMOCK BLUFF DRIVE
JACKSONVILLE, FL 32226 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, NICOLE
3891 HAMMOCK BLUFF DRIVE
JACKSONVILLE, FL 32226 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 AMBR
Name DAVIS, NICOLE
Address 14269 SEA EAGLE DR
City-State-Zip: JACKSONVILLE FL 32226

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: NICOLE DAVIS

OWNER

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date