

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000139033

**Entity Name:** SENIOR LIVING SERVICES LLC

**Current Principal Place of Business:**

357 6TH AVENUE WEST  
BRADENTON, FL 34205

**Current Mailing Address:**

PO 1518  
BRADENTON, FL 34206 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

CONARD, RICHARD T  
357 6TH AVENUE WEST  
BRADENTON, FL 34205 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           MANAGER  
Name           CONARD, RICHARD T MD  
Address        357 6TH AVENUE WEST  
City-State-Zip: BRADENTON FL 34205

Title           MANAGER  
Name           CONARD, ELIZABETH ANN  
Address        615 RIVIERA DUNES WAY  
                  UNIT 401  
City-State-Zip: PALMETTO FL 34221

*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:** RICHARD T CONARD

**MANAGER**

**04/14/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date