## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000032909

Entity Name: BONITA BAY CONCIERGE NURSING, LLC

Current Principal Place of Business:

8891 BRIGHTON LANE SUITE #109 BONITA SPRINGS, FL 34135

## **Current Mailing Address:**

3484 POINTE CREEK COURT TOWNHOME # 202 BONITA SPRINGS, FL 34134 US

FEI Number: 85-0620956 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DECARLUCCI, DANIELLE A 3484 POINTE CREEK COURT TOWNHOME # 202 BONITA SPRINGS, FL 34134 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

FILED Feb 04, 2021

**Secretary of State** 

9944201574CC

## Authorized Person(s) Detail:

Title MGR

Name DECARLUCCI, DANIELLE A
Address 3484 POINTE CREEK COURT

TOWNHOME # 202

City-State-Zip: BONITA SPRINGS FL 34134

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: DANIELLE DECARLUCCI

02/04/2021

**OWNER** 

Date