

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000372726

Entity Name: MORRISON'S ADULT LIVING FACILITY LLC

Current Principal Place of Business:

6804 N CENTRAL AVE
TAMPA, FL 33604

Current Mailing Address:

6804 N CENTRAL AVE
TAMPA, FL 33604 US

FEI Number: 93-2547880

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TOMPKINS, GREGORY
6804 N CENTRAL AVE
TAMPA, FL 33604 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: GREGORY TOMPKINS

02/13/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name TOMPKINS, GREGORY
Address 6804 N CENTRAL AVE
City-State-Zip: TAMPA FL 33604

Title MANAGER
Name BATTLE, CHERRITA
Address 6804 N CENTRAL AVE
City-State-Zip: TAMPA FL 33604

Title MANAGER
Name THOMPSON, IZOLA
Address 6804 N CENTRAL AVE
City-State-Zip: TAMPA FL 33604

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: GREGORY TOMPKINS

MANAGER

02/13/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date