## **2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000000299

Entity Name: SUMMERVILLE AT GOLDEN POND LLC

**Current Principal Place of Business:** 

111 WESTWOOD PLACE

SUITE 400

BRENTWOOD, TN 37027

**Current Mailing Address:** 

111 WESTWOOD PLACE

SUITE 400

BRENTWOOD, TN 37027 US

FEI Number: 20-4130558 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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** Apr 29, 2019

**Secretary of State** 

2421776135CC

Authorized Person(s) Detail:

Title **MGRM** Title CEO, PRESIDENT

SUMMERVILLE SENIOR LIVING, INC Name Name BAIER, LUCINDA M

Address 111 WESTWOOD PLACE Address 111 WESTWOOD PLACE SUITE 400

SUITE 400

SUITE 400

BRENTWOOD TN 37027 BRENTWOOD TN 37027 City-State-Zip: City-State-Zip:

Title **EVP** Title **EVP AND SECRETARY** 

WHITE, CHAD C. Name PATCHETT, MARY SUE Name

111 WESTWOOD PLACE 111 WESTWOOD PLACE Address Address

SUITE 400

BRENTWOOD TN 37027 BRENTWOOD TN 37027 City-State-Zip: City-State-Zip:

Title CFO Title SVP

SWAIN, STEVEN LESKOWICZ, JOANNE Name Name

111 WESTWOOD PLACE 6737 W WASHINGTON STREET Address Address

> SUITE 400 **SUITE 2300**

BRENTWOOD TN 37027 MILWAUKEE WI 53214 City-State-Zip: City-State-Zip:

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: CHAD C. WHITE

SECRETARY

04/29/2019