2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000003158

Entity Name: HARBORCHASE OF JACKSONVILLE, LLC

Current Principal Place of Business:

958 20TH PLACE 2ND FLOOR

VERO BEACH, FL 32960

FILED
Apr 24, 2019
Secretary of State
1302532989CC

Current Mailing Address:

958 20TH PLACE 2ND FLOOR VERO BEACH, FL 32960 US

FEI Number: 02-0697157 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC. 115 NORTH CALHOUN ST., SUITE 4 TALLAHASSEE, FL 32301 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:

Address

Name

Address

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title CHAIRMAN/MANAGING PARTNER

(DIRECTOR)

Name SMICK, TIMOTHY S

958 20TH PLACE

2ND FLOOR

City-State-Zip: VERO BEACH FL 32960

Title SECRETARY/VICE PRESIDENT/CHIEF

DEVELOPMENT OFFICER

JENNINGS. CHARLES N

Address 958 20TH PLACE

2ND FLOOR

City Ctata 7in. VEDO DEACH EL 2000

City-State-Zip: VERO BEACH FL 32960

Title ASSISTANT SECRETARY, CFO,

TREASURER

Name COLLINS, CHRIS

958 20TH PLACE 2ND FLOOR

0: 0: 7: 1/50005101151

City-State-Zip: VERO BEACH FL 32960

Title COO

Name LEWIS, KIM

Address 958 20TH PLACE

2ND FLOOR
City-State-Zip: VERO BEACH FL 32960

Title PRESIDENT, CEO

Name HANSON, SARABETH

Address 958 20TH PLACE

2ND FLOOR

City-State-Zip: VERO BEACH FL 32960

Title TREASURER, CFO

Name MITCHELL, THOMAS

Address 958 20TH PLACE

2ND FLOOR

City-State-Zip: VERO BEACH FL 32960

Title SOLE MANAGER

Name SENIOR LIVING HOLDINGS, LLC

Address 958 20TH PLACE

2ND FLOOR

City-State-Zip: VERO BEACH FL 32960

Title EVP, GENERAL COUNSEL,

ASSISTANT SECRETARY

Name SCIMECA, MARK

958 20TH PLACE 2ND FLOOR

City-State-Zip: VERO BEACH FL 32960

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.

Address

SIGNATURE: TIMOTHY S. SMICK

CHAIRMAN/MANAGING PARTNER (DIRECTOR)

04/24/2019