

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000003170

Entity Name: HARBORCHASE OF NORTH COLLIER, LLC**Current Principal Place of Business:**958 20TH PLACE
2ND FLOOR
VERO BEACH, FL 32960**Current Mailing Address:**958 20TH PLACE
2ND FLOOR
VERO BEACH, FL 32960 US**FEI Number:** 20-4054062**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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title CHAIRMAN/MANAGING PARTNER
Name SMICK, TIMOTHY S
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 SECRETARY/VICE PRESIDENT/CHIEF
DEVELOPMENT OFFICER
Name JENNINGS, CHARLES N.
Address 958 20TH PLACE
2ND FLOOR
City-State-Zip: VERO BEACH FL 32960

Title ASSISTANT SECRETARY, CFO,
TREASURER
Name COLLINS, CHRIS
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

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: TIMOTHY S. SMICK**CHAIRMAN/MANAGING
PARTNER****04/27/2022**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date