## **2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M22000004466

Entity Name: WILTON MANORS HEALTHCARE & REHABILITATIN CENTER

LLC

FILED
Mar 22, 2023
Secretary of State
9976593692CC

#### **Current Principal Place of Business:**

2675 N ANDREWS AVE

WILTON MANORS, FL 33311-2509

# **Current Mailing Address:**

400 RELLA BLVD SUITE 200 MONTEBELLO, NY 10901 US

FEI Number: 88-1467025 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

INTERSTATE AGENT SERVICES, LL 100 SE 2ND STREET STE 2000 #209 MIAMI, FL 33131 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 MBR

Name WILTON MANORS SNF HOLDCO LLC

Address 400 RELLA BLVD

City-State-Zip: MONTEBELLO NY 10901

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: WILTON MANORS SNF HOLDCO LLC

**MBR** 

03/22/2023