

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000009756

Entity Name: ACTIVE CARE ASSISTED LIVING FACILITY, INC.

Current Principal Place of Business:

2436 LAKE JACKSON CIRCLE
APOPKA, FL 32703

Current Mailing Address:

2436 LAKE JACKSON CIRCLE
APOPKA, FL 32703

FEI Number: 81-5166869

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARKER-PATTERSON, KRYSTAL M
2436 LAKE JACKSON CIRCLE
APOPKA, FL 32703 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

Officer/Director Detail :

Title CEO
Name PARKER-PATTERSON, KRYSTAL M
Address 2436 LAKE JACKSON CIRCLE
City-State-Zip: APOPKA FL 32703

Title CFO
Name GAITHERREDFERN, LATAYA
Address 2436 LAKE JACKSON CIRCLE
City-State-Zip: APOPKA FL 32703

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KRYSTAL M PARKER-PATTERSON

CEO

05/26/2020

Electronic Signature of Signing Officer/Director Detail

Date