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. CEO

SIGNATURE: THOMAS OSCAR WINGO JR

Electronic Signature of Signing Officer/Director Detail

City-State-Zip: OLDSMAR FL 34677 City-State-Zip: OLDSMAR FL 34677

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Officer/Director Detail :			
Title	DPST	Title	DIRECTOR
Name	WINGO, THOMAS O JR	Name	WINGO, EUDES
Address	1877 MUIRFIELD WAY	Address	1877 MUIRFIELD WAY
City State Zin:		City-State-Zin	OLDSMAR EL 34677

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.

Name and Address of Current Registered Agent:

WINGO, THOMAS O JR 1877 MUIRFIELD WAY

OLDSMAR, FL 34677 US

SIGNATURE:

DOCUMENT# P19000059898 Entity Name: TLC ADULT DAY CARE AND RECREATION CENTER INC.

Current Principal Place of Business:

3970 TAMPA RD SUITE J OLDSMAR, FL 34677

Current Mailing Address:

1877 MUIRFIELD WAY OLDSMAR, FL 34677 US

FEI Number: 84-2625221

Electronic Signature of Registered Agent

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED

Certificate of Status Desired: No

02/05/2024

Date

Date

Feb 05, 2024 Secretary of State 0596417089CC