

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000090814

Entity Name: THERAPEUTIC ASSISTED LIVING CORP

Current Principal Place of Business:

25 LYNDENHURST LN,
PALM COAST, FL 32137

Current Mailing Address:

25 LYNDENHURST LN,
PALM COAST, FL 32137

FEI Number: 84-3805381

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GILYARD, LATASHA D
25 LYNDENHURST LN
PALM COAST,, FL 32137 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 P
Name GILYARD, LATASHA D
Address 25 LYNDENHURST LN
City-State-Zip: PALM COAST FL 32137

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: LATASHA D GILYARD

PRESIDENT

02/04/2021

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date