

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000011599

**Entity Name:** SENIOR ASSIST PLUS INC

**Current Principal Place of Business:**

2819 BLUESLATE COURT  
LAND O LAKES, FL 34638

**Current Mailing Address:**

2819 BLUESLATE COURT  
LAND O LAKES, FL 34638 US

**FEI Number:** 92-2311057

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BROOKS, NAOMI S  
2819 BLUESLATE COURT  
LAND O LAKES, FL 34638 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            D P  
Name            NAOMI S. BROOKS  
Address        2819 BLUESLATE COURT  
City-State-Zip: LAND O LAKES FL 34638

Title            D VP  
Name            JUNE KRAFF  
Address        2819 BLUESLATE COURT  
City-State-Zip: LAND O LAKES FL 34638

*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:** NAOMI S BROOKS

**REGISTERED AGENT**

**02/07/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date