### 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025120

Entity Name: SENIOR MANAGEMENT CARE PROGRAMS, INC.

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

855 LANCASTER RD. DELAND. FL 32720

# **Current Mailing Address:**

P. O. BOX 4582

DELAND. FL 32721-4582

FEI Number: 59-3571638 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GAGNON, JULIA A 855 LANCASTER RD. DELAND, FL 32720 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

**FILED** Jan 24, 2016

**Secretary of State** 

CC9392460078

#### Officer/Director Detail:

Title Title VΡ

Name GAGNON, JULIA A Name JUNIOR, TAMMY L Address 855 LANCASTER RD. Address 855 LANCASTER RD. City-State-Zip: DELAND FL 32720 City-State-Zip: DELAND FL 32720

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: JULIA A. GAGNON

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

01/24/2016

Date