

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S66152

Entity Name: LAKE HEALTH CARE CENTER, INC.

Current Principal Place of Business:

910 MT HOMER RD
EUSTIS, FL 32726

Current Mailing Address:

910 MT HOMER RD
EUSTIS, FL 32726 US

FEI Number: 59-3081973

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STONE, GERKEN PA
4850 N. HWY 19A
MOUNT DORA, FL 32757 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 FERNANDES, JAMES S
Address 910 MT HOMER RD
City-State-Zip: EUSTIS FL 32726

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: JAMES S FERNANDES

P

01/18/2018

Electronic Signature of Signing Officer/Director Detail

Date