## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000007952

Entity Name: RIVERSIDE NURSING HOME, L.L.C.

Current Principal Place of Business:

5710 WOOSTER PIKE

SUITE #122

CINCINNATI, OH 45227

**Current Mailing Address:** 

5710 WOOSTER PIKE SUITE #122 CINCINNATI, OH 45227

FEI Number: 31-1756213 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLER, KELLY A 3813 WEST SAN JUAN STREET TAMPA, FL 33629 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: KELLY A KELLER 03/11/2025

Electronic Signature of Registered Agent

Date

FILED Mar 11, 2025

**Secretary of State** 

0745395060CC

## Authorized Person(s) Detail:

Title MGR

Address

Name KELLER, CHRISTOPHER L

5710 WOOSTER PIKE SUITE #122

City-State-Zip: CINCINNATI OH 45227

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: CHRISTOPHER KELLER

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MANAGER

03/11/2025 Date