## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000055190

Entity Name: HARBOR VERO BEACH MANAGEMENT, LLC

**FILED** Apr 30, 2019 **Secretary of State** 8929368191CC

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

958 20TH PLACE 2ND FLOOR

VERO BEACH, FL 32960

## **Current Mailing Address:**

958 20TH PLACE 2ND FLOOR

VERO BEACH, FL 32960 US

FEI Number: 20-2624656 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COGENCY GLOBAL INC. 115 NORTH CALHOUN ST. SUITE 4

TALLAHASSEE, FL 32301 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

**PRESIDENT** 

Authorized Person(s) Detail:

Title CHAIRMAN/MANAGING PARTNER Title

Name SMICK, TIMOTHY S Name HANSON, SARABETH

958 20TH PLACE 958 20TH PLACE Address Address 2ND FLOOR

2ND FLOOR

City-State-Zip: VERO BEACH FL 32960 City-State-Zip: VERO BEACH FL 32960

Title SECRETARY, VICE PRESIDENT Title **TREASURER** Name JENNINGS, CHARLES Name SCIMECA, MARK

Address 958 20TH PLACE Address 958 20TH PLACE

2ND FLOOR 2ND FLOOR

City-State-Zip: VERO BEACH FL 32960 City-State-Zip: VERO BEACH FL 32960

Title ASSISTANT Title SOLE MEMBER AND MANAGER

SECRETARY/CFO/TREASURER HARBOR ASSISTED LIVING, LLC Name Name COLLINS, CHRIS

958 20TH PLACE Address Address

958 20TH PLACE 2ND FLOOR 2ND FLOOR

City-State-Zip: VERO BEACH FL 32960 VERO BEACH FL 32960 City-State-Zip:

Title COO

LEWIS, KIM Name Address 958 20TH PLACE

2ND FLOOR

VERO BEACH FL 32960 City-State-Zip:

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.

SIGNATURE: TIMOTHY S. SMICK CHAIRMAN/MANAGING 04/30/2019 **PARTNER** 

Electronic Signature of Signing Authorized Person(s) Detail

Date