

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000041776

**Entity Name:** ABOVE THE REST ASSISTED LIVING FACILITY LLC

**Current Principal Place of Business:**

2360 MADRID AVE SE  
PALM BAY, FL 32909

**Current Mailing Address:**

2360 MADRID AVE SE  
PALM BAY, FL 32909 US

**FEI Number:** 20-2749397

**Certificate of Status Desired:** No

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

ANDERSON, J. PATRICK  
930 S. HARBOR CITY BLVD., SUITE 505  
MELBOURNE, FL 32901 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

**Authorized Person(s) Detail :**

Title MGRM  
Name WEISE, ELIZABETH V  
Address 1363 PAYETTE LANE  
City-State-Zip: WEST MELBOURNE FL 32904

*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:** ELIZABETH WEISE

**PRESIDENT**

**04/24/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date