2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099129

Entity Name: FAITH HOUSE ASSISTED LIVING FACILITY, LLC

Current Principal Place of Business:

335 FOSTER COVE CHULUOTA. FL 32766

Current Mailing Address:

290 STONER RD

WINTER SPRINGS. FL 32708 US

FEI Number: 20-5721235 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DURAND, CARLOS 290 STONER RD WINTER SPRINGS, FL 32708 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: CARLOS DURAND 02/09/2020

Electronic Signature of Registered Agent

Date

FILED Feb 09, 2020

Secretary of State

5657029719CC

Authorized Person(s) Detail:

Title MGRM Title MGRM

NameDURAND, MARYNameDURAND, CARLOSAddress290 STONER RDAddress290 STONER RD

City-State-Zip: WINTER SPRINGS FL 32708 City-State-Zip: WINTER SPRINGS FL 32708

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.

OWNER

SIGNATURE: CARLOS DURAND

Electronic Signature of Signing Authorized Person(s) Detail

02/09/2020 Date