

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000056687

Entity Name: RESIDENTS' AID FUND OF PENNEY RETIREMENT
COMMUNITY, LLC**Current Principal Place of Business:**3495 HOFFMAN STREET
PENNEY FARMS, FL 32079-0555**Current Mailing Address:**P.O. BOX 555
PENNEY FARMS, FL 32079-0555**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PENNEY RETIREMENT COMMUNITY, INC.
3495 HOFFMAN STREET
PENNEY FARMS, FL 32079-0555 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 TREASURER
Name YEAGER, RICHARD
Address 3495 HOFFMAN STREET
City-State-Zip: PENNEY FARMS FL 32079-0555

Title SECRETARY
Name HALL, ALICE
Address 3495 HOFFMAN STREET
City-State-Zip: PENNEY FARMS FL 32079-0555

Title MANAGER
Name SCOTT, TERESA
Address 3495 HOFFMAN STREET
City-State-Zip: PENNEY FARMS FL 32079-0555

Title MANAGER
Name BROWN, BILL
Address 3495 HOFFMAN STREET
City-State-Zip: PENNEY FARMS FL 32079

Title MANAGER
Name DULANEY, RICHARD
Address 3495 HOFFMAN STREET
City-State-Zip: PENNEY FARMS FL 32079

Title MANAGER
Name SANSBURY, BETTY-JO
Address 3495 HOFFMAN STREET
City-State-Zip: PENNEY FARMS FL 32079

Title ASSISTANT TREASURER
Name KNIGHT, JAMES
Address 3495 HOFFMAN STREET
City-State-Zip: PENNEY FARMS FL 32079

Title PRESIDENT
Name VANDER KAMP, STEVE
Address 3495 HOFFMAN STREET
City-State-Zip: PENNEY FARMS FL 32079

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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: TERESA SCOTT**REGISTERED AGENT
PRESIDENT/CEO****04/26/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title	MANAGER
Name	HODGES, ROBERT
Address	3495 HOFFMAN STREET
City-State-Zip:	PENNEY FARMS FL 32079