## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000024167

Entity Name: STONE CREEK SENIOR HEALTH, LLC

**Current Principal Place of Business:** 

7485 SW 97TH TERRACE RD OCALA, FL 34481

**Current Mailing Address:** 

7485 SW 97TH TERRACE RD OCALA, FL 34481 US

FEI Number: 27-5234512 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VEALEY, AUSTIN 7380 SW 60TH AVE., SUITE 1 OCALA, FL 34476 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: AUSTIN VEALEY 01/03/2019

Electronic Signature of Registered Agent

Date

FILED Jan 03, 2019

**Secretary of State** 

CC3138818665

Authorized Person(s) Detail:

Title MGR Title MEMBER

NameSCHROADER, DARRYNameSCHROADER, DARAAddress7485 SW 97TH TERRACE RDAddress13501 BLYTHEWOOD DRCity-State-Zip:OCALA FL 34481City-State-Zip:SPRING HILL FL 34609

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: DARRY SCHROADER

**OFFICER** 

01/03/2019