

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000099449

Entity Name: ABUNDANT LIFE NURSING AND SUPPORTIVE SERVICES LLC

Current Principal Place of Business:

2799 W OLD HWY 441
MOUNT DORA, FL 32757

Current Mailing Address:

2799 W OLD HWY 441
MOUNT DORA, FL 32757 US

FEI Number: 80-0843624

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLEN, PATRICIA F.
2799 W OLD HWY 441
MOUNT DORA, FL 32757 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: PATRICIA ALLEN

01/28/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title OWNER
Name ALLEN, PATRICIA F.
Address 2799 W OLD HWY 441
City-State-Zip: MOUNT DORA FL 32757

Title MGR
Name ALLEN, PATRICIA
Address 2799 W OLD HWY 441
City-State-Zip: MOUNT DORA FL 32757

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: PATRICIA ALLEN

MANAGER

01/28/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date