

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000137281

Entity Name: CLEWISTON NURSING & REHABILITATION LLC

Current Principal Place of Business:

301 S. GLORIA STREET
CLEWISTON, FL 33440-3520

Current Mailing Address:

301 S. GLORIA STREET
CLEWISTON, FL 33440-3520 US

FEI Number: 47-4844098

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: PETER A LEWIS

04/05/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title DIRECTOR
Name CLEWISTON NURSING &
REHABILITATION HOLDINGS LLC
Address 400 RELLA BOULEVARD
SUITE 200
City-State-Zip: MONTEBELLO FL 10901

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: CLEWISTON NURSING & REHABILITATION LLC

DIRECTOR

04/05/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date