

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000128365

Entity Name: EDEN PARADISE ASSISTED LIVING LLC

Current Principal Place of Business:

6 NW 35TH AVENUE
CAPE CORAL, FL 33993

Current Mailing Address:

PO BOX 1330
ESTERO, FL 33928 US

FEI Number: 81-3150683

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARKINSON, ABBUBACCA T
17265 HADLOW PLACE
FORT MYERS, FL 33967 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: ABBUBACCA PARKINSON

02/08/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title DIRECTOR
Name PARKINSON, ABBUBACCA
Address 17265 HADLOW PLACE
City-State-Zip: FORT MYERS FL 33967

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: ABBUBACCA PARKINSON

DIRECTOR

02/08/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date