

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000203321

Entity Name: ADVANCE SENIOR DAY CARE LLC

Current Principal Place of Business:

1901 S. JOHN YOUNG PKWY
SUITE 101
KISSIMMEE, FL 34741

Current Mailing Address:

1901 S. JOHN YOUNG PKWY
SUITE 101
KISSIMMEE, FL 34741 US

FEI Number: 81-4376302

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FAIL SAFE ACCOUNTING LLC
20 SOUTH ROSE AVE
SUITE 4
KISSIMMEE, FL 34741 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 MGR
Name FONSECA, NORBERTO
Address 1901 S. JOHN YOUNG PKWY
SUITE 101
City-State-Zip: KISSIMMEE FL 34741

Title MEMBER
Name VASQUEZ, ANA M
Address 1901 S. JOHN YOUNG PKWY
SUITE 101
City-State-Zip: KISSIMMEE FL 34741

Title MEMBER
Name VILLAR, ANA M
Address 1372 E VINE ST
City-State-Zip: KISSIMMEE FL 34744

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: ANA M VASQUEZ

MEMBER

04/09/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date