#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000141993

Entity Name: HARBOR CARE NURSING ASSOCIATES LLC

FILED Feb 03, 2020 Secretary of State 0012850414CC

## **Current Principal Place of Business:**

589 HARBOR LAKE CIRCLE PALM HARBOR. FL 34683

## **Current Mailing Address:**

589 HARBOR LAKE CIRCLE PALM HARBOR. FL 34683 US

FEI Number: 82-2039257 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

ROUSSEAU, SANDRA 589 HARBOR LAKE CIRCLE PALM HARBOR, FL 34683 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 F

Name ROUSSEAU, SANDRA
Address 589 HARBOR LAKE CIRCLE

City-State-Zip: PALM HARBOR FL 34683

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: SANDRA ROUSSEAU

PRESIDENT 02/03/2020

Date