2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2019
Secretary of State
5721832098CC

DOCUMENT# L18000069155

Entity Name: ANGEL OF LIGHT ASSISTED LIVING FACILITY LLC

Current Principal Place of Business:

613 SW HOMELAND ROAD
PORT ST LUCIE, FL 34953

Current Mailing Address:

5792 NW ZINNIA STREET
PORT ST LUCIE, FL 34986 FL

FEI Number: 82-4960498

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BISHOP, ISOLYN E
5792 NW ZINNIA STREET
PORT ST LUCIE, FL 34986 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	BISHOP, ISOLYN E
Address	5792 NW ZINNIA STREET
City-State-Zip:	PORT ST LUCIE FL 34986

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: ISOLYN BISHOP MANAGER 04/25/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date