

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000002111

**Entity Name:** SENIOR SERVICES OF FLORIDA,LLC

**Current Principal Place of Business:**

15367 LAKE WISTERIA RD  
DELRAY BEACH, FL 33484

**Current Mailing Address:**

15367 LAKE WISTERIA RD  
DELRAY BEACH, FL 33484 US

**FEI Number:** 84-4224313

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PRESSMAN, SHELDON  
15367 LAKE WISTERIA RD  
DELRAY BEACH, FL 33484 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 AR  
Name PRESSMAN, SHELDON  
Address 15367 LAKE WISTERIA RD  
City-State-Zip: DELRAY BEACH FL 33484

*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:** SHELDON PRESSMAN

**MANAGER**

**04/07/2022**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date