

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000099569

**Entity Name:** ENHANCED LIFESTYLE SENIOR HEALTHCARE LLC

**Current Principal Place of Business:**

2125 HARDEN BOULEVARD  
LAKELAND, FL 33803

**Current Mailing Address:**

2125 HARDEN BOULEVARD  
LAKELAND, FL 33803 US

**FEI Number:** 86-2626098

**Certificate of Status Desired:** Yes

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

REINOSO, JOSE GABRIEL  
640 OSPREY LANDING DR  
LAKELAND, FL 33813 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:** JOSE GABRIEL REINOSO

05/01/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name REINOSO, JOSE GABRIEL  
Address 6336 PROMINENCE POINT DRIVE  
City-State-Zip: LAKELAND FL 33813

*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:** JOSE REINOSO

MANAGER

05/01/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date