

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000204044

**Entity Name:** MHP BAYONET ELDERLY SLP, LLC**Current Principal Place of Business:**777 BRICKELL AVENUE SUITE 1300  
MIAMI, FL 33131**Current Mailing Address:**777 BRICKELL AVENUE SUITE 1300  
MIAMI, FL 33131 US**FEI Number:** 99-1575008**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK, INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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 W. PATRICK MCDOWELL 2001 TRUST  
Address 777 BRICKELL AVENUE SUITE 1300  
City-State-Zip: MIAMI FL 33131

Title CCEO  
Name MCDOWELL, W PATRICK  
Address 777 BRICKELL AVENUE SUITE 1300  
City-State-Zip: MIAMI FL 33131

Title COO  
Name SHEAR, CHRISTOPHER  
Address 777 BRICKELL AVENUE SUITE 1300  
City-State-Zip: MIAMI FL 33131

Title CFO  
Name TINCHER, PATRICIA  
Address 777 BRICKELL AVENUE SUITE 1300  
City-State-Zip: MIAMI FL 33131

Title PS  
Name LEE, KENNETH  
Address 157 COLUMBUS AVE  
SUITE 527  
City-State-Zip: NEW YORK NY 10023

Title AS  
Name DHADDA, MANPREET  
Address 777 BRICKELL AVENUE SUITE 1300  
City-State-Zip: MIAMI FL 33131

*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:** PATRICIA TINCHER**CFO****02/05/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date