


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90158 016 ****50.00

DOCUMENT # L03000007177							
1. Entity Name SENIOR RESOURCE SERVICES, LLC							
Principal Place of Business 1001 HEATHROW PARK LANE, SUITE 5001 LAKE MARY, FL 32746			Mailing Address P.O. BOX 958465 LAKE MARY, FL 32795-8465				
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State		4. FEI Number 56-2320735			
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
HOWE, DANILAS 1001 HEATHROW PARK LANE, SUITE 5001 LAKE MARY, FL 32746			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			City			FL	Zip Code
			8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE			DATE				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)							
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES				
TITLE	MGR <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME	VANDERHORST, RICHARD L	NAME					
STREET ADDRESS	4213 BRYNWOOD DRIVE	STREET ADDRESS					
CITY-ST-ZIP	NAPLES, FL 34119	CITY-ST-ZIP					
TITLE	MGRM <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME	ENGLISH, PETER	NAME					
STREET ADDRESS	1001 HEATHROW PARK LANE, SUITE 5001	STREET ADDRESS					
CITY-ST-ZIP	LAKE MARY, FL 32746	CITY-ST-ZIP					
TITLE	MGRM <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME	GRAY, DONALD M	NAME					
STREET ADDRESS	1001 HEATHROW PARK LANE, SUITE 5001	STREET ADDRESS					
CITY-ST-ZIP	LAKE MARY, FL 32746	CITY-ST-ZIP					
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME		NAME	Assistant Secretary				
STREET ADDRESS		STREET ADDRESS	Janice Baker				
CITY-ST-ZIP		CITY-ST-ZIP	1001 Heathrow Pk Ln, Ste 5001				
			Lake Mary, FL 32746				
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME		NAME	Vice President				
STREET ADDRESS		STREET ADDRESS	Carl L. Cochran				
CITY-ST-ZIP		CITY-ST-ZIP	1001 Heathrow Pk Ln, Ste 5001				
			Lake Mary, FL 32746				
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME		NAME	AVP				
STREET ADDRESS		STREET ADDRESS	Brian Koopmans				
CITY-ST-ZIP		CITY-ST-ZIP	1001 Heathrow Pk Ln, Ste 5001				
			Lake Mary, FL 32746				
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.							
SIGNATURE: <i>J. Baker</i>			1/18/06 407-945-8000, 8684				
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #				



FLORIDA DEPARTMENT OF STATE
Division of Corporations

ATTACHMENT

20003885

January 13, 2006

SENIOR RESOURCE SERVICES, LLC
P.O. BOX 958465
LAKE MARY, FL 32795-8465

SUBJECT: SENIOR RESOURCE SERVICES, LLC
Ref. Number: L03000007177

We have received your document for SENIOR RESOURCE SERVICES, LLC and check(s) totaling \$45.00. However, your check(s) and document are being returned for the following:

Documents reinstating the above listed entity were previously filed with this office. Please see the attached computer printout.

YOU ONLY NEED TO FILE FOR 2006. PLEASE SEND CHECK FOR \$50.00 ALONG WITH THE 2006 REPORT.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Registration/Qualification Section
Division of Corporations Letter Number: 506A00002768