

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094953

FILED
Aug 06, 2007
Secretary of State

Entity Name: BRENTWOOD MANOR ASSISTED LIVING, LLC

Current Principal Place of Business:

6327 BRENTWOOD MANOR AVENUE
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

6327 BRENTWOOD MANOR AVENUE
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SQUIRES, TAMI L
3064 MYRICA STREET
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SQUIRES, TAMI L
Address: 3064 MYRICA STREET
City-St-Zip: NORTH PORT, FL 34286 US

Title: MGRM (X) Delete
Name: KLEIN, MICHAEL
Address: 146 MECCA STREET
City-St-Zip: PORT CHARLOTTE, FL 33954 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: TAMI L SQUIRES

MGR

08/06/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date