

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L95000000220

**FILED**  
**Mar 04, 2004**  
**Secretary of State**

**Entity Name:** GLEN OAKS OF TALLAHASSEE, L.C.

**Current Principal Place of Business:**

615 CRESCENT EXECUTIVE CT., SUITE 120  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

615 CRESCENT EXECUTIVE CT., SUITE 120  
LAKE MARY, FL 32746

**New Mailing Address:**

**FEI Number:** 65-0718187

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRAY, N. DWAYNE ESQ.  
135 WEST CENTRAL BLVD., SUITE 1100  
ORLANDO, FL 32801 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: BORCK, TODD  
Address: 615 CRESCENT EXECUTIVE CT., SUITE 120  
City-St-Zip: LAKE MARY, FL 32746

Title: MGRM ( ) Delete  
Name: WILLNER, STUART  
Address: 1117 RUSSELL DRIVE  
City-St-Zip: HIGHLAND BEACH, FL 33487

**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 for the exemption stated in Section 119.07(3)(i), 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: TODD L. BORCK

MGR

03/04/2004

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