2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Jan 09, 2015
Secretary of State
CC2956722609

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Entity Name: HEALTHCARE RESIDENTIAL, LTD.

Current Principal Place of Business:

19308 SW 380 STREET
FLORIDA CITY, FL 33034

Current Mailing Address:

P.O. BOX 343529
FLORIDA CITY, FL 33034

FEI Number: 36-4715821

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COHEN, GARY J
201 SOUTH BISCAYNE BOULEVARD
SUITE 1500 (GJC)
MIAMI, FL 33131 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

General Partner Detail :

Document #	
Name	EVERGLADES HEALTHCARE RESIDENTIAL LLC
Address	19308 SW 380 STREET
City-State-Zip:	FLORIDA CITY FL 33034

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVEN KIRK PRESIDENT 01/09/2015

Electronic Signature of Signing General Partner Detail — Date