

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000028188

**Entity Name:** DOS OF CRYSTAL RIVER ALF, LLC

**Current Principal Place of Business:**

300 - 71ST STREET  
SUITE 410  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

300 - 71ST STREET  
SUITE 410  
MIAMI BEACH, FL 33141 US

**FEI Number:** 20-2546042

**Certificate of Status Desired:** No

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

SCHLESINGER & ASSOCIATES PA  
800 BRICKELL AVENUE, SUITE 1400  
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

**Authorized Person(s) Detail :**

Title MGR  
Name DOS ASSISTED LIVING GROUP, LLC  
Address 300 71ST STREET, SUITE 410  
City-State-Zip: MIAMI BEACH FL 33141

*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:** DOS ASSISTED LIVING GROUP, LLC

MGR

04/29/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date