

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000006265

Entity Name: ERICKSON SENIOR LIVING, LLC**Current Principal Place of Business:**701 MAIDEN CHOICE LANE
BALTIMORE, MD 21228**Current Mailing Address:**701 MAIDEN CHOICE LANE
BALTIMORE, MD 21228**FEI Number:** 27-1855064**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	MGRM
Name	ERICKSON LIVING HOLDINGS, LLC
Address	701 MAIDEN CHOICE LANE
City-State-Zip:	BALTIMORE MD 21228

Title	CEO
Name	BUTLER, R. ALAN
Address	701 MAIDEN CHOICE LANE
City-State-Zip:	BALTIMORE MD 21228

Title	COO
Name	DOYLE, DEBRA B.
Address	701 MAIDEN CHOICE LANE
City-State-Zip:	BALTIMORE MD 21228

Title	CFO
Name	SWEETSER, CHRISTIAN
Address	701 MAIDEN CHOICE LANE
City-State-Zip:	BALTIMORE MD 21228

Title	TREASURER
Name	HALL, JOHN D.
Address	701 MAIDEN CHOICE LANE
City-State-Zip:	BALTIMORE MD 21228

Title	SECRETARY
Name	OLIVERI, SUSAN L.
Address	701 MAIDEN CHOICE LANE
City-State-Zip:	BALTIMORE MD 21228

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: SUSAN L. OLIVERI**SECRETARY****05/01/2022**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date