

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED


04 JUN 15 PM 3: 58

CLERK OF DISTRICT COURT
 TALLAHASSEE FLORIDA

MSJH

DOCUMENT # A01000001569

1. Entity Name
 SENIOR LIVING OF TYLER, LTD.




Principal Place of Business
 111 NE 1ST STREET, STE. 820
 MIAMI, FL 33132

Mailing Address
 111 NE 1ST STREET, STE. 820
 MIAMI, FL 33132

2. Principal Place of Business
 Suite, Apt. #, etc.
 City, & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City, & State
 Zip Country



04292004 Chg-LP CR2E003 (10/03) 4/15

4. FEI Number
 03-0454032 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 TESCHER GUTTER CHAVES JOSEPHER RUBIN, PA
 2101 CORPORATE BLVD., STE. 107
 BOCA RATON, FL 33431

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record: \$100.00

10. Amount of Capital Contributions in FLORIDA to date.

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P01000113298	STREET ADDRESS	
NAME	SENIOR LIVING OF TYLER, INC.	CITY-ST-ZIP	2000381606 112
STREET ADDRESS	111 NE 1ST STREET, STE. 820	STREET ADDRESS	06/22/04--01007--004 **150.00
CITY-ST-ZIP	MIAMI, FL 33132	CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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CITY-ST-ZIP		CITY-ST-ZIP	

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify 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 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

SIGNATURE: Nancy J. Ansley, Pres. Senior Living of Tyler, Inc. Date: 4/28/04 Daytime Phone #: 305-416-9066

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
 NANCY J ANSLEY