2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A06000000951

GROZA, PATRICIA A

1417 SW OSPREY COVE

PORT SAINT LUCIE, FL 34986

Name: Address:

City-St-Zip:

Entity Name: 5 STAR LIVING, LTD.

FILED Apr 21, 2009 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 511 S.W. PORT SAINT LUCIE BLVD. PORT SAINT LUCIE, FL 34953 **Current Mailing Address: New Mailing Address:** 511 S.W. PORT SAINT LUCIE BLVD. PORT SAINT LUCIE, FL 34953 FEI Number: 20-5306412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GROZA, JOHN A 1417 SW OSPREY COVE PORT SAINT LUCIE, FL 34986 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 INFORMATION: ADDRESS CHANGES ONLY: Document #: Name: GROZA, JOHN A 1417 SW OSPREY COVE Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34986 City-St-Zip: Document #:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: PATRICIA A GROZA GP 04/21/2009