2012 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A30170

Entity Name: LIFESTYLES & HEALTHCARE, LTD.

FILED Feb 29, 2012 Secretary of State

Date

Current Principal Place of Business: New Principal Place of Business:

406 NW 4TH ST

OKEECHOBEE, FL 34972 US

Current Mailing Address: New Mailing Address:

P.O. BOX 759

OKEECHOBEE, FL 34973 US

FEI Number: 65-0188926 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:

WILLIAMSON, JENNIFER L ESQ. 759 SW FEDERAL HIGHWAY SUITE 106 STUART, FL 34994 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

GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:

Document #: L22103 Name: SENIORS

 Address:
 406 NW 4TH STREET
 Address:

 City-St-Zip:
 OKEECHOBEE, FL 34972 US
 City-St-Zip:

I hereby 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: FAYE A HAVERLOCK P 02/29/2012