## 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DO NOT WRITE IN THIS SPACE

## DOCUMENT # B93000000237

LIBERTY ASSISTED LIVING CENTERS LIMITED **PARTNERSHIP** 



**FILED** May 01, 2008 08:00 AN Secretary of State

Principal Place of Business

3073 HORSESHOE DR. STE. 100 NAPLES, FL 34104

Mailing Address

3073 HORSESHOE DR. STE. 100 NAPLES, FL 34104



04302008 No Chg-LP

CR2E003 (12/06)

4. FEI Number 58-2051810 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET STE 105 TALLAHASSEE, FL 32301

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8. The above named entity submits this statement for the purpose of changing its registered office	e or registered agent, or both, in the State of Florida. I am familiar with, and accept	
the obligations of registered agent	U00000942329	
SIGNATURE	05/29/08-80014-022 500.00	
Signature, typed or printed name of registered agent and little if applicable	DATE	
FILE NOW!!! FEE IS \$500.00		

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. e form; an amendment must be filed to change a general partner.

NOTE: General Partners MAT NOT be changed on the		
12.	GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F93000002513 LIBERTY ASSISTED LIVING CENTERS OF FL.,INC 3073 HORSESHOE DR. STE. 100 NAPLES, FL 34104	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

George P. Wagner, Jr.

4-30-08

239-963-3400