

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 07, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L00000010075**

1. Entity Name  
**BROOKWOOD-WASHINGTON COUNTY CONVALESCENT  
CENTER, LLC**



Principal Place of Business  
**803 N. CALHOUN STREET  
TALLAHASSEE, FL 32303**

Mailing Address  
**803 N. CALHOUN STREET  
TALLAHASSEE, FL 32303**

**DO NOT WRITE  
IN THIS SPACE**



01142006No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
**NOT APPLICABLE**

Applied For  
**Not Applicable**

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**MACK, THEODORE E  
803 N. CALHOUN STREET  
TALLAHASSEE, FL 32303**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2006**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>M BROOKWOOD-WASHINGTON COUNTY CONVALESCENT C BAY POINT BOX 27790 PANAMA CITY, FL 324117790</b>
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U000000424781  
02/18/06-80062-014 50.00

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11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**Kenneth P. Gummels, Authorized Representative**

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**1/24/2006 850-233-8800**

Date

Daytime Phone #