

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000001288

FILED  
Jan 03, 2003  
Secretary of State

Entity Name: CARRIAGE HOUSE SENIOR CARE LLC

**Current Principal Place of Business:**

5209 HWY 331 SOUTH  
DEFUNIAK SPRINGS, FL 32433

**New Principal Place of Business:**

5209 HWY 331 SOUTH  
DEFUNIAK SPRINGS, FL 32435

**Current Mailing Address:**

5209 HWY 331 SOUTH  
DEFUNIAK SPRINGS, FL 32433

**New Mailing Address:**

5209 HWY 331 SOUTH  
DEFUNIAK SPRINGS, FL 32435

FEI Number: 47-0850100

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COLON, FRANK  
5209 HWY 331 SOUTH  
DEFUNIAK SPRINGS, FL 32433

**Name and Address of New Registered Agent:**

COLON, FRANK MANAGER  
5209 HWY 331 SOUTH  
DEFUNIAK SPRINGS, FL 32435

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: FRANK COLON

01/03/2003

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: COLON, FRANK  
Address: 5209 HWY 331 S  
City-St-Zip: DEFUNIAK SPRINGS, FL 32435 US

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

SIGNATURE: FRANK COLON

MGR

01/03/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date