2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006841

Entity Name: FI-HIGHLAND TERRACE, LLC

FILED Apr 24, 2009 Secretary of State

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

111 SOUTH HIGHLAND AVE.

CLEARWATER, FL 33756 US

1111 SOUTH HIGHLAND AVE.

CLEARWATER, FL 33756 US

CLEARWATER, FL 33756 US

Current Mailing Address: New Mailing Address:

C/O 100 SECOND AVE. SO. SUITE 901 SOUTH SAINT PETERSBURG, FL 33701 US

FEI Number: 32-0051433 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:

SPECTOR GADON & ROSEN, LLP 360 CENTRAL AVENUE, SUITE 1550 ST PETERSBURG, FL 33701 US

CLEARWATER, FL 33756 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:

City-St-Zip:

Electronic Signature of Registered Agent Date

City-St-Zip:

CLEARWATER, FL 33756 US

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 MADONNA, HARRY DILLON
 Name:

 Address:
 360 CENTRAL AVE SUITE 1550
 Address:

 City-St-Zip:
 ST PETERSBURG, FL 33701 US
 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: ADMINISTRATOR Name: ADMINISTRATOR

Address: 111 SOUTH HIGHLAND AVE. Address: 1111 SOUTH HIGHLAND AVE. City-St-Zip: CLEARWATER, FL 33756 US City-St-Zip: CLEARWATER, FL 33756 US

Title: MGR () Delete Title: MGR (X) Change () Addition Name: DIRECTOR OF NURSING Name: DIRECTOR OF NURSING Address: 111 SOUTH HIGHLAND AVE.

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 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: HARRY DILLON MADONNA MGR 04/24/2009