

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT


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07 SEP 21 PM 2:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



07092007 Chg-LLC CR2E083 (12/06)

<b>DOCUMENT # L03000007177</b>			
1. Entity Name <b>SENIOR RESOURCE SERVICES, LLC</b>			
Principal Place of Business <b>1001 HEATHROW PARK LANE, SUITE 5001 LAKE MARY, FL 32746</b>		Mailing Address <b>P.O. BOX 958465 LAKE MARY, FL 32795-8465</b>	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>56-2320735</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	

<b>6. Name and Address of Current Registered Agent</b>	<b>7. Name and Address of New Registered Agent</b>
<b>HOWE, DANILAS</b> 1001 HEATHROW PARK LANE, SUITE 5001 LAKE MARY, FL 32746	Name
	Street Address (P.O. Box Number is Not Acceptable)
	City
	<b>FL</b> Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$50.00 Due by September 14, 2007</b>		<b>Make check payable to Florida Department of State</b>
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9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE	MGR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VANDERHORST, RICHARD L		NAME	Stewart B. Najjar	
STREET ADDRESS	4213 BRYNWOOD DRIVE		STREET ADDRESS	1001 Heathrow Park Ln # 5001	
CITY-ST-ZIP	NAPLES, FL 34119		CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE	MGRM	<input checked="" type="checkbox"/> Delete	TITLE	SUPT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ENGLISH, PETER		NAME	John M. Squawok	
STREET ADDRESS	1001 HEATHROW PARK LANE, SUITE 5001		STREET ADDRESS	1001 Heathrow Park Ln # 5001	
CITY-ST-ZIP	LAKE MARY, FL 32746		CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE	MGRM	<input checked="" type="checkbox"/> Delete	TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GRAY, DONALD M		NAME	Barny Rusin	
STREET ADDRESS	1001 HEATHROW PARK LANE, SUITE 5001		STREET ADDRESS	1001 Heathrow Park Ln # 5001	
CITY-ST-ZIP	LAKE MARY, FL 32746		CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE	AS	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAKER, JANICE		NAME		
STREET ADDRESS	1001 HEATHROW PK. LN, STE. 50001		STREET ADDRESS		
CITY-ST-ZIP	LAKE MARY, FL 32746		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COCHRANE, CARL L		NAME		
STREET ADDRESS	1001 HEATHROW PH. LN., STE. 5001		STREET ADDRESS		
CITY-ST-ZIP	LAKE MARY, FL 32746		CITY-ST-ZIP		
TITLE	AVP	<input type="checkbox"/> Delete	TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOOPMANS, BRIAN		NAME	Koopmans, Brian	
STREET ADDRESS	1001 HEATHROW PK., LN., STE. 5001		STREET ADDRESS	1001 Heathrow Park Ln # 5001	
CITY-ST-ZIP	LAKE MARY, FL 32746		CITY-ST-ZIP	LAKE MARY FL 32746	

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.

**SIGNATURE:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #