

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027880

FILED
Apr 29, 2009
Secretary of State

Entity Name: LAKEWOOD SENIOR LIVING, LLC

Current Principal Place of Business:

269 SOUTH OSPREY AVENUE, SUITE 200
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

269 SOUTH OSPREY AVENUE, SUITE 200
SARASOTA, FL 34236

New Mailing Address:

7309 E. 21ST STREET N., STE 110
WICHITA, KS 67206

FEI Number: 20-0150767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAGNER, E. JOHN II
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RUSSELL, STEPHEN D
Address: 269 S. OSPREY AVE., SUITE 200
City-St-Zip: SARASOTA, FL 34236

Title: MGRM () Delete
Name: BUCHANAN, TIMOTHY
Address: 7309 E. 21ST N., SUITE 110
City-St-Zip: WICHITA, KS 67206

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TIMOTHY J. BUCHANAN

MGRM

04/29/2009

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