2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000048983

FILED Mar 29, 2004 Secretary of State

Entity Name: VANDERBILT BEACH ASSISTED LIVING HOME LLC

Current Principal Place of Business:

C/O AARON A. FARMER, P.A.

1415 PANTHER LANE, STE 121

New Principal Place of Business:

517 - 100TH AVENUE, NORTH
NAPLES, FL 34108

NAPLES, FL 34109

Current Mailing Address: New Mailing Address:

C/O AARON A. FARMER, P.A. 517 - 100TH AVENUE, NORTH 1415 PANTHER LANE, STE 121 NAPLES, FL 34108

NAPLES, FL 34109

FEI Number: 20-0420718 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:

US REGISTERED AGENT, INC. ATTN: AARON A FARMER 1415 PANTHER LANE, STE 121 NAPLES, FL 34109 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

BERS/MEMBERS: ADDITIONS/CHANGES:

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

 Name:
 Name:
 BROOKS, CANDICE MGR

 Address:
 Address:
 517 - 100TH AVENUE, NORTH

 City-St-Zip:
 City-St-Zip:
 NAPLES, FL 34108

Title: () Delete Title: MGR () Change (X) Addition Name: BROOKS, DANIEL L MGR
Address: Address: 517 - 100TH AVENUE, NORTH

City-St-Zip: City-St-Zip: NAPLES, FL 34108

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: CANDICE BROOKS MGR 03/29/2004