

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Sep 12, 2005 8:00 am**  
**Secretary of State**

08-29-2005 90039 007 \*\*\*\*50.00

<b>DOCUMENT # L04000003841</b>					
<b>1. Entity Name</b> SENIOR HEALTH MANAGEMENT-EX, LLC					
<b>Principal Place of Business</b> 100 SECOND AVENUE SOUTH SUITE 901S ST. PETERSBURG, FL 33701 US			<b>Mailing Address</b> 100 SECOND AVENUE SOUTH SUITE 901S ST. PETERSBURG, FL 33701 US		
<b>2. Principal Place of Business</b> Suite, Apt. #, etc.			<b>3. Mailing Address</b> Suite, Apt. #, etc.		
<b>City &amp; State</b>			<b>City &amp; State</b>		
<b>Zip</b>		<b>Country</b>		<b>Zip</b>	
<b>Country</b>		<b>Country</b>		<b>4. FEI Number</b> 20-0863198	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>				<b>Applied For</b> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b> SENIOR HEALTH MANAGEMENT, L.L.C. 100 SECOND AVENUE SOUTH SUITE 901S ST. PETERSBURG, FL 33701			<b>7. Name and Address of New Registered Agent</b> Name: <u>Spector Bradin &amp; Rosen</u> Street Address (P.O. Box Number is Not Acceptable): <u>360 Central Ave., Suite 1550</u> City: <u>St. Petersburg, FL</u> Zip Code: <u>33701</u>		
<b>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.</b> SIGNATURE: <u>Nikki Sobel</u> DATE: <u>8-18-05</u> <small>Signed as, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
<b>Filing Fee is \$50.00</b> <b>Due by September 7, 2005</b>			<b>Make check payable to</b> <b>Florida Department of State</b>		
<b>9. MANAGING MEMBERS / MANAGERS</b>			<b>10. ADDITIONS / CHANGES</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
[Empty Row]			MEMBERS CFO BAAT L. WYATT 100 2ND AVE SOUTH, STE 901S ST. PETERSBURG, FL 33701		
[Empty Row]			MEMBER CEO JOYCE A. HADLESKI 100 2ND AVE SOUTH, STE 901S ST. PETERSBURG, FL 33701		
[Empty Row]			[Empty Row]		
[Empty Row]			[Empty Row]		
[Empty Row]			[Empty Row]		
[Empty Row]			[Empty Row]		
<b>11. I hereby certify that the information supplied with this filing does not qualify 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 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 606, Florida Statutes.</b>					
<b>SIGNATURE:</b> <u>Nikki Sobel</u>			<b>SIGNATURE:</b> <u>Nikki Sobel</u>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date</small> <u>8-18-05</u> <small>Daytime Phone #</small> <u>727-896-4600</u>		

30011146



08032005 Chg-LLC CR2E083 (10/03)



ATTACHMENT

30011146

FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State

August 30, 2005

SENIOR HEALTH MANAGEMENT-EX, LLC  
100 SECOND AVENUE SOUTH  
SUITE 901S  
ST. PETERSBURG, FL 33701 US

Subject: **SENIOR HEALTH MANAGEMENT-EX, LLC**

Reference Number: **L04000003841**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Provide the title(s) of each manager, managing member or principal listed on the report or on an attachment.

**TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION,  
PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF  
CORPORATIONS, P.O. BOX 6478, TALLAHASSEE, FLORIDA 32314  
WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

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ANNUAL REPORTS SECTION