2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000046853

1. Entity Name
ALABAMA OAKS INDEPENDENT LIVING, LLC



FILED Apr 05, 2007 08:00 Al Secretary of State

Principal Place of Business

C/O HARRIS CRAMER LLP 1555 PALM BEACH LAKES BLVD SUITE 310 WEST PALM BEACH, FL 33401 US Mailing Address

C/O HARRIS CRAMER LLP 1555 PALM BEACH LAKES BLVD SUITE 310 WEST PALM BEACH, FL 33401 US



02072007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number			Applied For
65-1113725		į	Not Applicable
5. Certificate of Status Desired	X	\$5.0 Fee F	Additional uired

6. Name and Address of Current Registered Agent

HARRIS CRAMER, LLP 1555 PALM BEACH LAKES BOULEVRAD SUITE 310 WEST PALM BEACH, FL 33401

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WEST PALM BEACH, FL 33401		IN	IN THIS SPACE			
	e named entity submits this statement for the purpose of chan tions of registered agent.	ging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept			
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	DATE			
Fi	iling Fee is \$50.00 ue by May 1, 2007					
9.	MANAGING MEMBERS/MANAGERS					
NAME SIREEI ADDRESS CITY-SI-ZIP	MGR ALABAMA OAKS ASSISTED LIVING, INC. 1555 PALM BEACH BOULEVARD SUITE 310 WEST PALM BEACH, FL 33401		U00000691906			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			04/13/07-80029-015 55.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-SI-ZIP		IN .	THIS SPACE			
TITLE NAME STREET AÔDRESS CITY-S1-ZIP						
TITLE						

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:

STREET ADDRESS CITY-ST-ZIP

RE:

3/17/07

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Dayt⊪ne Phone #