2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000059164

FRANCO, DARELYN

931 KOKOMO KEY LANE

DELRAY BEACH, FL 33483

Name:

Address:

City-St-Zip:

FILED Apr 29, 2008 Secretary of State

Entity Name: HIDDEN GARDEN ASSISTED LIVING RESIDENCE, L.L.C.

Current Pr	incipal Place	of Business:	New Principal Place	New Principal Place of Business:	
	JS AVENUE .M BEACH, FI	_ 33406			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	JS AVENUE .M BEACH, FI	_ 33406			
FEI Number:	86-1116292	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:					
BOURNE, ROBERT E JR 521 LAKE AVENUE STE. 3 LAKE WORTH, FL US					
	named entity : of Florida.	submits this statement for the pu	rpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	nic Signature of Registered Ager	t	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	SMITH, MAURI	SPRINGS CIRCLE #104	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	MGRM () Delete	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: DARELYN FRANCO MGRM 04/29/2008