

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000088745

FILED
Feb 01, 2011
Secretary of State

Entity Name: LAKE WALES HEALTH CARE OPERATIONS COMPANY, LLC

Current Principal Place of Business:

701 OVERLOOK DR., SE
WINTER HAVEN, FL 33884 US

New Principal Place of Business:

Current Mailing Address:

1800 N WABASH
SUITE 300
MARION, IN 46952 US

New Mailing Address:

FEI Number: 20-3616834 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HOUGHTON, SAMUEL A
500 S FLORIDA AVE
SUITE 800
LAKELAND, FL 33801 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
Name: OTT, GARY L
Address: 1800 N WABASH AVE STE 300
City-St-Zip: MARION, IN 46952 US

Title: ST
Name: OTT, DWIGHT A
Address: 1800 N WABASH RD STE 300
City-St-Zip: MARION, IN 46952 US

I hereby 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: DWIGHT A OTT

ST

02/01/2011

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