

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000010189

FILED
Jul 06, 2008
Secretary of State

Entity Name: PREMIER SENIOR LIVING COMMUNITIES, LLC

Current Principal Place of Business:

33 RAEMOND LANE
PALM COAST, FL 32164

New Principal Place of Business:

39 FALLEN OAK LANE
PALM COAST, FL 32137

Current Mailing Address:

33 RAEMOND LANE
PALM COAST, FL 32164

New Mailing Address:

39 FALLEN OAK LANE
PALM COAST, FL 32137

FEI Number: 20-4541329 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CONNER, JAY
33 RAEMOND LANE
PALM COAST, FL 32164 US

Name and Address of New Registered Agent:

CONNER, JAY
39 FALLEN OAK LANE
PALM COAST, FL 32137 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: _____

07/06/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CONNER, JAY
Address: 33 RAEMOND LANE
City-St-Zip: PALM COAST, FL 32164

Title: MGR () Delete
Name: STEPHENS, STANLEY E
Address: 11 CRATON ROAD
City-St-Zip: SILVER CREEK, GA 30173

Title: MGR () Delete
Name: STEPHENS, MARY D
Address: 11 CRATON ROAD
City-St-Zip: SILVER CREEK, GA 30173

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CONNER, JAY
Address: 39 FALLEN OAK LANE
City-St-Zip: PALM COAST, FL 32137

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAY CONNER

MGR

07/06/2008

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