2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2008
Secretary of State

DOCUMENT# L06000120084

Entity Name: WESTFALL ASSISTED LIVING FACILITY, LLC.

Current Principal Place of Business:

1960 ASPEN RIDGE CT.
OCOEE, FL 34761

New Principal Place of Business:

431 BALBOA BLVD
CLERMONT, FL 34715

Current Mailing Address:

1960 ASPEN RIDGE CT.
OCOEE, FL 34761

New Mailing Address:

431 BALBOA BLVD
CLERMONT, FL 34715

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

Name and Address of Current Registered Agent:

VENORD, JEAN M
1960 ASPEN RIDGE CT.
OCOEE, FL 34761 US

Name and Address of New Registered Agent:

VENORD, JEAN M
431 BALBOA BLVD
CLERMONT, FL 34715 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: JEAN M. VENORD 03/20/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: VENORD, JEAN M
Address: 1960 ASPEN RIDGE CT.
City-St-Zip: OCOEE, FL 34761 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: VENORD, JEAN M MGRM
Address: 431 BALBOA BLVD
City-St-Zip: CLERMONT, FL 34715 US

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: JEAN M. VENORD MGRM 03/20/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date