

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000036248

FILED
Mar 10, 2009
Secretary of State

Entity Name: FRIENDLY HEARTS SENIOR SERVICES, LLC

Current Principal Place of Business:

122 BURNT PINE DRIVE
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

122 BURNT PINE DRIVE
NAPLES, FL 34119

New Mailing Address:

FEI Number: 20-8824547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KIRKPATRICK, BLAKE W ESQ
4001 TAMiami TRAIL NORTH, STE 330
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

KIRKPATRICK, BLAKE W ESQ
9132 STRADA PLACE
FOURTH FLOOR
NAPLES, FL 34108 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:

03/10/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JESSUP, NICOLE M
Address: 122 BURNT PINE DRIVE
City-St-Zip: NAPLES, FL 34119

Title: MGR () Delete
Name: JESSUP, RICHARD M
Address: 122 BURNT PINE DRIVE
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JESSUP, NICOLE M
Address: 122 BURNT PINE DRIVE
City-St-Zip: NAPLES, FL 34119

Title: MGRM (X) Change () Addition
Name: JESSUP, RICHARD M
Address: 122 BURNT PINE DRIVE
City-St-Zip: NAPLES, FL 34119

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: NICOLE M. JESSUP

MGRM

03/10/2009

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