

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000076478

**FILED**  
**Mar 09, 2012**  
**Secretary of State**

**Entity Name:** OKEECHOBEE ASSISTED LIVING, LLC

**Current Principal Place of Business:**

608 NE 2ND AVE.  
OKEECHOBEE, FL 34972 US

**New Principal Place of Business:**

**Current Mailing Address:**

608 NE 2ND AVE.  
OKEECHOBEE, FL 34972 US

**New Mailing Address:**

**FEI Number:** 26-0581013

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NOORUDDIN, SHAHNAZ  
608 NE 2ND AVE  
OKEECHOBEE, FL 34972 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:** KHAN, SAEED  
**Address:** P.O. BOX 448  
**City-St-Zip:** OKEECHOBEE, FL 34973 US

**Title:** MGRM  
**Name:** SHAKOOR, ARIF  
**Address:** P.O. BOX 448  
**City-St-Zip:** OKEECHOBEE, FL 34973 US

**Title:** MGRM  
**Name:** NOORUDDIN, SHAHNAZ  
**Address:** P.O. BOX 448  
**City-St-Zip:** OKEECHOBEE, FL 34973 US

**Title:** MGRM  
**Name:** NOORUDDIN, MUHAMMAD  
**Address:** P.O. BOX 448  
**City-St-Zip:** OKEECHOBEE, FL 34973 US

**Title:** MGRM  
**Name:** KHAN, MYRA  
**Address:** P.O. BOX 448  
**City-St-Zip:** OKEECHOBEE, FL 34973 US

**Title:** MGRM  
**Name:** SHAKOOR, ELMA  
**Address:** PO BOX 448  
**City-St-Zip:** OKEECHOBEE, FL 34973

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:** SHAHNAZ NOORUDDIN

MGRM

03/09/2012

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