

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000121644

**FILED**  
**Feb 01, 2011**  
**Secretary of State**

**Entity Name:** BALMORAL ASSISTED LIVING SUITES LLC

**Current Principal Place of Business:**

93 BALMORAL DRIVE  
LAKE PLACID, FL 33852

**New Principal Place of Business:**

**Current Mailing Address:**

93 BALMORAL DRIVE  
LAKE PLACID, FL 33852

**New Mailing Address:**

11 N. SUMMERLIN AVENUE  
SUITE 210  
ORLANDO, FL 32801

**FEI Number:** 26-1642213

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHARPE, DANNY R MR  
93 BALMORAL DRIVE  
LAKE PLACID, FL 33852 US

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

BURT, RICHARD A II  
11 N. SUMMERLIN AVENUE  
SUITE 210  
ORLANDO, FL 32801 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: RICHARD BURT

02/01/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: HOUGHTON, GEORGE  
Address: 11 N. SUMMERLIN AVENUE, SUITE 210  
City-St-Zip: ORLANDO, FL 32801 US

Title: MGRM  
Name: SENTINEL CAPITAL FUNDING, INC.  
Address: 11 N. SUMMERLIN AVENUE, SUITE 210  
City-St-Zip: ORLANDO, FL 32801 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: RICHARD BURT

MGRM

02/01/2011

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