2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000064394

FILED Jan 21, 2009 Secretary of State

Entity Name: MAGNOLIA MANOR SENIOR DAY PROGRAM, LLC

Current Principal Place of Business: New Principal Place of Business:

1241 AIRPORT ROAD, STE A 141 BARKS DRIVE

DESTIN, FL 32541 FORT WALTON BEACH, FL 32547

Current Mailing Address: New Mailing Address:

1241 AIRPORT ROAD, STE A 141 BARKS DRIVE

DESTIN, FL 32541 FORT WALTON BEACH, FL 32547

FEI Number: 26-2925355 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HERNDON, BRADLEY P 25 WALTER MARTIN ROAD, STE 202 FORT WALTON BEACH, FL 32548

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: ADDITIONS/CHANGES:

MGRM () Delete Title: () Change () Addition

ELIM HOME-CLARY, LLC. Name: Name: Address: 1241 AIRPORT ROAD, STE A Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

ANTHONY, VALERIE Name: Name: Address: 109 DOODLE AVENUE Address: City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

O'NEAL, SARA Name: Name: 114 JIMMY STREET Address: Address: City-St-Zip: FORT WALTON BEACH, FL 32547 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: SARA O'NEAL **MGRM** 01/21/2009