

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000105545

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA SENIOR RESOURCES, LLC

**Current Principal Place of Business:**

9350 BAY PLAZA BLVD.  
SUITE 120-04  
TAMPA, FL 33619

**New Principal Place of Business:**

**Current Mailing Address:**

20 CEDAR SPRING ROAD  
BURLINGTON, CT 06013

**New Mailing Address:**

**FEI Number:** 26-3699968

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OHALL, LAURIE E  
9350 BAY PLAZA BLVD.  
SUITE 120-04  
TAMPA, FL FL 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:** TULLY, DANIEL O  
**Address:** 20 CEDAR SPRING ROAD  
**City-St-Zip:** BURLINGTON, CT 06013

**Title:** MGRM  
**Name:** TULLY, MARY C  
**Address:** 20 CEDAR SPRING ROAD  
**City-St-Zip:** BURLINGTON, CT 06013

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:** MARY C. TULLY

MGRM

04/11/2011

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