

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000029963

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Entity Name:** SENIOR LIVING UNLIMITED LLC

**Current Principal Place of Business:**

2689 ART MUSEUM DRIVE  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

2689 ART MUSEUM DRIVE  
JACKSONVILLE, FL 32207

**New Mailing Address:**

FEI Number: 26-4625677

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ARGUILLA, FREDDIE M  
1101 ROUNDTREE CIRCLE  
JACKSONVILLE, FL 32259 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: ARGUILLA, FREDDIE M  
Address: 1101 ROUNDTREE CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32259

Title: MGRM  
Name: WAGNER, WILLIAM  
Address: 12038 DALMATION LANE W  
City-St-Zip: JACKSONVILLE, FL 32246

Title: MGRM  
Name: FONTAINE, WILLIAM E JR  
Address: 6135 CEDAR HILLS BLVD.  
City-St-Zip: JACKSONVILLE, FL 32210

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: FREDDIE M ARGUILLA

MGRM

04/22/2011

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