

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000122890

FILED
May 01, 2012
Secretary of State

Entity Name: HIGHER DEMENTION ASSISTED LIVING, LLC

Current Principal Place of Business:

2509 HILL LAKE DRIVE
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

2509 HILL LAKE DRIVE
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 27-1623489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULLINGS, ALMANDO
2509 HILL LAKE DR.
TALLAHASSEE, FL 32308 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: MGR
Name: MULLINGS, JOANN B
Address: 2509 HILL LAKE DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGR
Name: MULLINGS, ALMANDO
Address: 2509 HILL LAKE DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

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: ALMANDO MULLINGS

MGR

05/01/2012

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