

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000085557

**FILED**  
**Apr 07, 2011**  
**Secretary of State**

**Entity Name:** HERITAGE OAKS SENIOR HOUSING, LLC

**Current Principal Place of Business:**

212 S. CENTRAL AVE.  
SUITE 301  
ST. LOUIS, MO 63105 US

**New Principal Place of Business:**

HERITAGE OAKS SENIOR HOUSING, LLC  
212 SOUTH CENTRAL AVE., SUITE 301  
ST. LOUIS, MO 63105 US

**Current Mailing Address:**

212 S. CENTRAL AVE.  
SUITE 301  
ST. LOUIS, MO 63105 US

**New Mailing Address:**

HERITAGE OAKS SENIOR HOUSING, LLC  
212 SOUTH CENTRAL AVE., SUITE 301  
ST. LOUIS, MO 63105 US

**FEI Number:** 58-2380540

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KENNEY, THERESA M ESQ.  
4348 SOUTHPOINT BLVD.  
SUITE 101  
JACKSONVILLE, FL 32216 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: ALLEGRO SENIOR LIVING, LLC  
Address: 212 S. CENTRAL AVE. SUITE 301  
City-St-Zip: ST. LOUIS, MO 63105 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: GEORGENE R. HEINZ

AUTH

04/07/2011

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