

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000034491

FILED  
Apr 06, 2012  
Secretary of State

**Entity Name:** SELAH SENIORCARE III, LLC

**Current Principal Place of Business:**

50 A1A NORTH  
SUITE 110  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

50 A1A NORTH  
SUITE 110  
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

**FEI Number:** 27-5465710      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

SELAH MANAGEMENT GROUP, LLC  
50 A1A NORTH  
SUITE 110  
PONTE VEDRA BEACH, FL 32082 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:** FILIPPONE, WILLIAM T  
**Address:** 50 A1A NORTH, SUITE 110  
**City-St-Zip:** PONTE VEDRA BEACH, FL 32082

**Title:** MGRM  
**Name:** PARRISH, ALAN D  
**Address:** 50 A1A NORTH, SUITE 110  
**City-St-Zip:** PONTE VEDRA BEACH, FL 32082

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: ALAN PARRISH

MGR

04/06/2012

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