

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

WL10/08

DOCUMENT # L99000006380

1. Entity Name
**THE OAKS RESIDENTIAL AND REHABILITATION
CENTER, LLC**



Principal Place of Business
3250 SOUTHWEST 41 PLACE
GAINSVILLE, FL 32608

Mailing Address
111 WEST MICHIGAN STREET
MILWAUKEE, WI 53203

Amended

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 SEP 29 PM 12:46



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

111 W. Michigan St.
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Milwaukee, WI

City & State

4. FEI Number

38-4321428

Applied For

Not Applicable

Zip

53203

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEXIS DOCUMENT SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when submitting)

DATE

Make Check Payment to Florida Department of State
Due By May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
RHINELANDER, MELVIN A
3250 SOUTHWEST 41 PLACE
GAINSVILLE, FL 32608 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PC
MCLAUGHLIN, JOHN G
3250 SOUTHWEST 41 PLACE
GAINSVILLE, FL 32608 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
SMALL, PHILIP
3250 SOUTHWEST 41 PLACE
GAINSVILLE, FL 32608 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BERTRAND, RICHARD L
3250 SOUTHWEST 41 PLACE
GAINSVILLE, FL 32608 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
CARTER, ROCH
3250 SOUTHWEST 41 PLACE
GAINSVILLE, FL 32608 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
DURISHAN, MARK W
3250 SOUTHWEST 41 PLACE
GAINSVILLE, FL 32608 ☒ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
Extendicare Health Facilities, Inc. ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 authorized officer empowered to execute this report as required by Chapter 606, Florida Statutes.

SIGNATURE:

Douglas S. Harris

9/18/03

414-908-8153

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

One

Daytime Phone #

CR2E083 (10/02)

200023672152
10/09/03--01070--014 **950.00