2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L99000009097

1. Entity Name
RETIREMENT LIVING COMPANIES OF AMERICA, L.L.C.

Principal Place of Business	Mailing Address
6465 N QUAIL HOLLOW STE 400 MEMPHIS, TN 38120	6465 N QUAIL HOLLOW STE 400 MEMPHIS, TN 38120

DO NOT WRITE IN THIS SPACE

04262006 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
58-2519986	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

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6. Name and Address of Current Registered Agent

CLARK, RONALD L
CLARK & CAMPBELL, P.A.
500 SOUTH FLORIDA AVE STE 800
LAKELAND, FL 33801

DO NOT WRITE IN THIS SPACE

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 reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2006

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9.   MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	TRAMMELL, CHARLES S
STREET ADDRESS	6465 N QUAIL HOLLOW RD #400
CITY-ST-ZIP	MEMPHIS, TN 38120

TITLE	
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CITY-ST-ZIP	

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05/19/06-80068-010 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE: _Charles Trammell, Jr._   Charles Trammell, Jr.   Apr. 26, 2006   901-794-2598

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #