2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001885

2280 CHESTER SPRINGS ROAD

City-St-Zip: CHESTER SPRINGS, PA 19425

Address:

Entity Name: PROFORMANCE SENIOR LIVING MANAGEMENT, LLC

FILED Mar 13, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
500 NORT SUITE 210	TH GULPH ROA	AD			
KING OF F	PRUSSIA, PA	19406			
Current Mailing Address:			New Mailing Address:		
SUITE 210	TH GULPH ROA) PRUSSIA, PA				
	: 04-3654725	FEI Number Applied For()	FEI Number Not App	oplicable () Certificate of Status Desired ()	
Name and	l Address of C	urrent Registered Agent:	Name and	nd Address of New Registered Agent:	
1201 HAYS TALLAHAS	ATION SERVIC S STREET SSEE, FL 3230 e named entity s	012525 US	ourpose of changing	g its registered office or registered agent, or botl	
	e of Florida.		an peec or enanging		
SIGNATU	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM () YARISH, ED 606 MEADOWV MAPLE GLEN, I		Title: Name: Address: City-St-Zip:	MGRM (X) Change () Addition YARISH, ED 500 NORTH GULPH ROAD, SUITE 210 KING OF PRUSSIA, PA 19406	
Title: Name: Address: City-St-Zip:	MGR (X) WEHR, FRANK 125 SPUR LANI WEST CHESTE		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGR (X) PLUSH, ALAN 3500 SUNBEAN SARASOTA, FL		Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	MGR (X) BARR, DAVID 101 STARGLAS SUNSET, SC 2		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	MGR (X)	Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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.

Address:

City-St-Zip:

SIGNATURE: EDWARD T YARISH MGRM 03/13/2006