

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 07, 2004 8:00 am**  
**Secretary of State**

05-07-2004 90002 002 \*\*\*\*50.00

<b>DOCUMENT # M02000002504</b>					
<b>1. Entity Name</b> SENIOR HEALTH MANAGEMENT - ORLANDO, LLC					
<b>Principal Place of Business</b> 110 SECOND AVE. SOUTH SUITE 401 S. SAINT PETERSBURG, FL 33701			<b>Mailing Address</b> 110 SECOND AVE. SOUTH SUITE 401 S. SAINT PETERSBURG, FL 33701		
<b>2. Principal Place of Business</b> 100 Second Ave. South		<b>3. Mailing Address</b> (same)			
Suite, Apt. #, etc. 901 S		Suite, Apt. #, etc.			
City & State St. Petersburg, FL		City & State			
Zip 33701		Country USA		Zip Country	
<b>6. Name and Address of Current Registered Agent</b> WYATT, BART 100 SECOND AVENUE SOUTH, SUITE 901 S ST PETERSBURG, FL 33701				<b>7. Name and Address of New Registered Agent</b> Name Spector Gadon & Rosen, LLP Street Address (P.O. Box Number is Not Acceptable) 360 Central Avenue, Ste. 1550 City St. Petersburg FL Zip Code 33701	
<b>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.</b> SIGNATURE  DATE <u>04/22/04</u> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$50.00</b> <b>Due by May 1, 2004</b>			Make check payable to Florida Department of State		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SENIOR HEALTH MANAGEMENT, LLC 100 SECOND AVENUE SOUTH, SUITE 901 S ST PETERSBURG, FL 33701	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BART WYATT 100 SECOND AVE SOUTH STE 901S ST. PETERSBURG, FL 33701	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JUYCE KAROLESKI 100 SECOND AVE SOUTH STE 901S ST. PETERSBURG, FL 33701	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
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<b>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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.</b>					
<b>SIGNATURE:</b>			DATE <u>4/22/2004</u> (727) 824-8800		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date Daytime Phone #</small>		

24067699



04132004 Chg-LLC CR2E083 (10/03)

4. FEI Number  
06-1654421

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WYATT, BART  
100 SECOND AVENUE SOUTH, SUITE 901 S  
ST PETERSBURG, FL 33701

Name  
Spector Gadon & Rosen, LLP  
Street Address (P.O. Box Number is Not Acceptable)  
360 Central Avenue, Ste. 1550

City  
St. Petersburg FL Zip Code  
33701

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Make check payable to  
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE