

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000322

FILED
Apr 29, 2006
Secretary of State

Entity Name: LAKE HARRIS HEALTH PROPERTIES, LLC

Current Principal Place of Business:

18167 U.S. HIGHWAY 19 NORTH
SUITE 660
CLEARWATER, FL 33764 US

New Principal Place of Business:

Current Mailing Address:

2701 N. ROCKY POINT DRIVE
SUITE 1160
TAMPA, FL 33607 US

New Mailing Address:

FEI Number: 51-0462102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGR (X) Delete
Name: JOHNSON EZELL HOLDIN, GS, LLC
Address: 18167 U.S. HIGHWAY 19 NORTH, SUITE 660
City-St-Zip: CLEARWATER, FL 33764 US

Title: MGR () Delete
Name: CSA SENIOR HOUSING I, NVESTMENTS, LL C
Address: 630 FIFTH AVENUE, 29TH FLOOR
City-St-Zip: NEW YORK, NY 10111

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: CRAIG E. ANDERSON

MGR

04/29/2006

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