

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90301 004 ****50.00

DOCUMENT # M05000004754

1. Entity Name
SENIORMED LLC



Principal Place of Business

104 WILMOT ROAD
MS 1435
DEERFIELD, IL 60015

Mailing Address

104 WILMOT ROAD
MS 1435
DEERFIELD, IL 60015

00014041



01092007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3145511

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**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, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
WASSON, GREGORY D
1417 LAKE COOK ROAD
DEERFIELD, IL 60015

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
RESNICK, ALLAN M
104 WILMOT ROAD
DEERFIELD, IL 60015

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
ZIMMERMAN, ROBERT
1417 LAKE COOK ROAD
DEERFIELD, IL 60015

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
GLEESON, JOHN W
200 WILMOT ROAD
DEERFIELD, IL 60015

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

Margarita E. Kellen

MARGARITA E. KELLEN
ASSISTANT TREASURER

1/9/2007

(847) 914-2500

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

Date

Daytime Phone #

ATTACHMENT

60014547

MD5000004754

SeniorMed LLC
Officers & Managers

<u>Name</u>	<u>Title</u>	<u>Corporate Address</u>
* G. D. Wasson	Chairman of the Board	1417 Lake Cook Road Deerfield, IL 60015
* S. L. Axelrod	President	480 South Chambers Road Aurora, CO 80017
* J. W. Gleeson	Vice President	200 Wilmot Road Deerfield, IL 60015
* A. M. Resnick	Vice President & Secretary	104 Wilmot Road Deerfield, IL 60015
* R. Zimmerman	Vice President & Treasurer	1417 Lake Cook Road Deerfield, IL 60015
M. E. Kellen	Assistant Treasurer	104 Wilmot Road Deerfield, IL 60015
* D. L. Sturm	Manager	480 South Chambers Road Aurora, CO 80017

* Indicates Manager