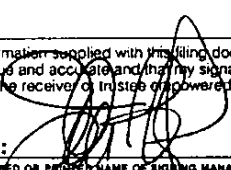


FILED
May 22, 2007 8:00 am
Secretary of State

04-23-2007 90362 034 ****50.00

2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # M06000001879			
1. Entity Name AHC SOUTHLAND-LONGWOOD, LLC			
Principal Place of Business 6737 W. WASHINGTON STREET, SUITE 2300 MILWAUKEE, WI 53214		Mailing Address 6737 W. WASHINGTON STREET, SUITE 2300 MILWAUKEE, WI 53214	
2. Principal Place of Business - No P.O. Box # 330 N. Wabash Suite, Apt. #, etc. #1400		3. Mailing Address 330 N. Wabash Suite, Apt. #, etc. #1400	
City & State CHICAGO, IL		City & State CHICAGO, IL	
Zip 60611		Zip 60611	
Country		Country	
4. FEI Number APPLIED FOR 20-4625997		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when registering) DATE _____			
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE MGR ☒ Delete NAME ALTERRA HEALTHCARE CORPORATION STREET ADDRESS 6736 W. WASHINGTON STREET, SUITE 2300 CITY-ST-ZIP MILWAUKEE, WI 53214		TITLE MGR ☒ Change ☐ Addition NAME Mark J. Schulte STREET ADDRESS 330 North Wabash, #1400 CITY-ST-ZIP Chicago, IL 60611	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE MGR ☐ Change ☒ Addition NAME John P. Rijos STREET ADDRESS 330 North Wabash, #1400 CITY-ST-ZIP Chicago, IL 60611	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE MGR ☐ Change ☒ Addition NAME Mark W. Ohlendorf STREET ADDRESS 6737 West Washington, #2300 CITY-ST-ZIP Milwaukee, WI 53214	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE MGR ☐ Change ☒ Addition NAME W.E. Sheriff STREET ADDRESS 111 Westwood Drive, #200 CITY-ST-ZIP Brentwood, TN 37027	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	
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: By:  John P. Rijos, Manager, 312/977-3700 04/10/07			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #			

30008011



04112007 Chg-LLC CR2E083 (12/06)