

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000003333

**FILED**  
**Apr 25, 2007**  
**Secretary of State**

**Entity Name:** APOPKA SENIOR LIVING, LLC

**Current Principal Place of Business:**

3723 FAIRVIEW INDUSTRIAL DRIVE SE  
SUITE 270  
SALEM, OR 97302

**New Principal Place of Business:**

203 SOUTH WEKIWA SPRINGS ROAD  
APOPKA, FL 32703

**Current Mailing Address:**

500 NORTH GULPH ROAD, STE. 210  
KING OF PRUSSIA, PA 19406

**New Mailing Address:**

FEI Number: 20-2185930

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH 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 ( ) Delete  
Name: YARISH, EDWARD T  
Address: 500 NORTH GULPH ROAD, STE. 210  
City-St-Zip: KING OF PRUSSIA, PA 19406

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify 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: EDWARD T YARISH

MGR

04/25/2007

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