

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000002513

FILED
Apr 07, 2011
Secretary of State

Entity Name: ALLEGRO SENIOR LIVING, LLC

Current Principal Place of Business:

212 SOUTH CENTRAL, SUITE 301
ST. LOUIS, MO 63105 US

New Principal Place of Business:

Current Mailing Address:

212 SOUTH CENTRAL, SUITE 301
ST. LOUIS, MO 63105 US

New Mailing Address:

FEI Number: 20-8709106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNEY, THERESA M ESQ
4348 SOUTHPOINT BLVD.
SUITE 101
JACKSONVILLE, FL 32216 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: CEO
Name: SCHIFFER, LAURENCE A
Address: 212 SOUTH CENTRAL AVE, SUITE 301
City-St-Zip: ST. LOUIS, MO 63105

Title: PRES
Name: SCHIFFER, DOUGLAS S
Address: 1050 CROWN POINTE PARKWAY, SUITE 960
City-St-Zip: ATLANTA, GA 30338

Title: PRES
Name: KIRKLAND, DAVID L
Address: 212 SOUTH CENTRAL AVE., SUITE 301
City-St-Zip: ST. LOUIS, MO 63105

Title: EVP
Name: MILLER, RICHARD C
Address: 212 SOUTH CENTRAL AVE., SUITE 301
City-St-Zip: ST. LOUIS, MO 63105

Title: VP
Name: KARN, ROBERT F
Address: 212 SOUTH CENTRAL AVE., SUITE 301
City-St-Zip: ST. LOUIS, MO 63105

Title: SEC
Name: LOVE, ANDREWS
Address: 212 SOUTH CENTRAL AVE., SUITE 301
City-St-Zip: ST. LOUIS, MO 63105

I hereby 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: GEORGENE R. HEINZ

AUTH

04/07/2011

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