

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000001389

FILED
May 05, 2010
Secretary of State

Entity Name: ORCHARD RIDGE NURSING CENTER LLC

Current Principal Place of Business:

101 SUN AVE NE
ALBUQUERQUE, NM 87109

New Principal Place of Business:

Current Mailing Address:

101 SUN AVE NE
ALBUQUERQUE, NM 87109

New Mailing Address:

FEI Number: 04-3072231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: MGRM
Name: HARBORSIDE HEALTHCARE CORPORATION
Address: 101 SUN AVE NE
City-St-Zip: ALBUQUERQUE, NM 87109

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: MICHAEL T. BERG, SECRETARY OF MGRM

MGRM

05/05/2010

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