2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000757

5800 TENNYSON PARKWAY

PLANO, TX 75024

Address:

City-St-Zip:

Entity Name: AMERICAN HEALTH FACILITIES DEVELOPMENT, LLC

FILED Jan 06, 2006 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 5800 TENNYSON PARKWAY PLANO, TX 75024 **Current Mailing Address: New Mailing Address:** 5800 TENNYSON PARKWAY PLANO, TX 75024 FEI Number: 62-1744953 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete SHELTON, JAMES D Name: Name: 5800 TENNYSON PARKWAY Address: Address: City-St-Zip: PLANO, TX 75024 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition FAY, DONALD P Name: HURLEY, REBECCA Name: Address: 5800 TENNYSON PARKWAY Address: 5800 TENNYSON PARKWAY City-St-Zip: PLANO, TX 75024 City-St-Zip: PLANO, TX 75024 Title: MGR () Delete Title: MGR (X) Change () Addition WHITMAN, BURKE FRAZIER, TOM Name: Name: 5800 TENNYSON PARKWAY 5800 TENNYSON PARKWAY Address: Address: City-St-Zip: PLANO, TX 75024 City-St-Zip: PLANO, TX 75024 Title: MGR () Delete Title: () Change () Addition Name: LOVE, STEPHEN W Name: 5800 TENNYSON PARKWAY Address: Address: City-St-Zip: PLANO, TX 75024 City-St-Zip: Title: MGR () Delete Title: () Change () Addition FRUTIGER, ROBERT Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: REBECCA HURLEY SVP 01/06/2006