

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000047399

Entity Name: JACOBS LADDER FAMILY III ASSISTED LIVING L.L.C.

Current Principal Place of Business:

1504 SOUTH FISKE BLVD.
ROCKLEDGE, FL 32955

Current Mailing Address:

812 FAULL LANE
ROCKLEDGE, FL 32955

FEI Number: 46-4499874

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DECLERCQ, KAROLENA M
812 FAULL LANE
ROCKLEDGE, FL 32955 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: KAROLENA M DECLERCQ

04/07/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name DECLERCQ, KAROLENA
Address 812 FAULL LANE
City-State-Zip: ROCKLEDGE FL 32955

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KAROLENA DECLERCQ

MANAGER

04/07/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date