## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 702277**

FILED Jan 14, 2005 Secretary of State

Entity Name: THE ALLIANCE COMMUNITY FOR RETIREMENT LIVING, INC.

**Current Principal Place of Business: New Principal Place of Business:** 600 SOUTH FLORIDA AVENUE DELAND, FL 32720 **Current Mailing Address: New Mailing Address:** 600 SOUTH FLORIDA AVENUE DELAND, FL 32720 FEI Number: 59-0817603 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHIEF FINANCIAL OFFICER P.O. BOX 6200 32314-6200 200 E. GAINES ST. TALLAHASSEE, FL 32399 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DUSS, DONNA J Name: Name: 5608 GOVERNOR'S PD. CIR Address: Address: City-St-Zip: ALEXANDRIA, VA 22310 City-St-Zip: Title: VD Title: ( ) Delete () Change () Addition DYS, PETER Name: Name: Address: 15000 SHELL POINT BLVD Address: City-St-Zip: FT MYERS, FL 33908 City-St-Zip: Title: () Delete Title: () Change () Addition ARNOLD, RICHARD L Name: Name: Address: 15475 GLENEAGLE DRIVE Address: City-St-Zip: COLORADO SPRINGS, CO 80921 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete Name: O'FARRELL, MARK Name: O'FARRELL, MARK 4110 SOUTH GOLDENROD ROAD Address: Address: 7212 CURRY FORD ROAD City-St-Zip: ORLANDO, FL 32872 City-St-Zip: ORLANDO, FL 32822 Title: () Delete Title: () Change () Addition MINTER, STEVEN L Name: Name: 4775 BRIDGE RD. Address: Address: City-St-Zip: SUFFOLK, VA 23435 City-St-Zip: Title: () Delete Title: () Change () Addition CATHEY, GORDON DR Name: Name: Address: 1121 WINDMILL LANE Address: SILVER SPRINGS, MD 20905 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM ANDERSON CEO 01/14/2005