

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 836791

1. Corporation Name
Kelly Assisted Living Services, Inc.

Principal Place of Business 999 W. Big Beaver Rd. Troy, MI 48084	Mailing Address 999 W. Big Beaver Rd. Troy, MI 48084
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 Suite, Apt #, etc.	26 Suite, Apt #, etc.	08/03/72	04/03/95
22 City & State	27 City & State	4. FEI Number	Applied For
23 Zip	28 Zip	38-2110841	Not Applicable
24 Country	29 Country	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
25	30	6. Election Campaign Financing	<input type="checkbox"/> \$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent CT Corporation System 1200 S. Pine Island Road Plantation, Florida 33324	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 607.05(2) and 607.15(8), Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.05(5), Florida Statutes.

SIGNATURE _____
 Signature typed or printed name of registered agent and title, if applicable _____
 Date _____
 Title: Registered Agent (type or print name of registered agent) _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	See List Attached	1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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~~04/23/96-01059-004~~
*****200.00**

AEB
4-22-96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: RR Sulejman Vice President, Finance 4/12/96 (810) 244-4277

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

#836791
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OFFICERS AND DIRECTORS
OF
KELLY ASSISTED LIVING SERVICES, INC.

<u>NAME</u>	<u>OFFICE</u>	<u>RESIDENCE ADDRESS</u>
Terence E. Adderley	Chairman of the Board of Directors and President	362 Lone Pine Court Bloomfield Hills, MI 48013
Robert G. Barranco	Senior Vice President, Operations	320 N. Cranbrook Bloomfield Hills, MI 48301
Eugene L. Hartwig	Senior Vice President, General Counsel, Secretary and Director	1320 Covington Rd. Bloomfield Hills, MI 48301
Paul K. Geiger	Senior Vice President, Chief Financial Officer, Controller/Treasurer and Director	294 Linden Rd. Birmingham, MI 48009
Robert E. Thompson	Senior Vice President, Administration	71 S. Berkshire Bloomfield Hills, MI 48013
Patricia A. Lynett	Vice President and Chief Operating Officer	411 S. Woodward, #620 Birmingham, MI 48009
Charles M. McLaughlin	Vice President, Assistant General Counsel and Assistant Secretary	1305 Greenleaf Royal Oak, MI 48067
Richard R. Widgren	Vice President, Finance	23253 Robert John St. Clair Shores, MI 48080
Janice Gilbert Acosta	Assistant Secretary	6601 Cathedral Dr. Bloomfield Hills, MI 48301

Business Address of all Officers and Directors: 999 West Big Beaver
Troy, MI 48084

Mailing Address: P.O. Box 331179
Detroit, MI 48266

3/15/96