

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90030 026 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000006619

1. Corporation Name
EMERITUS PROPERTIES V.INC.

Principal Place of Business 3131 ELLIOT AVENUE, SUITE 500 SEATTLE WA 98121	Mailing Address 3131 ELLIOT AVENUE, SUITE 500 SEATTLE WA 98121
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/17/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 91-1746694	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes the current year Intangible Personal Property Tax.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRANDSTROM, RAYMOND R	1.2 NAME	
STREET ADDRESS	3131 ELLIOT AVENUE, SUITE 500	1.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA 98121	1.4 CITY-ST-ZIP	
TITLE	VC <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BATY, DANIEL R	2.2 NAME	
STREET ADDRESS	3131 ELLIOT AVENUE, SUITE 500	2.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA 98121	2.4 CITY-ST-ZIP	
TITLE	VPS <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRICE, KELLY J	3.2 NAME	
STREET ADDRESS	3131 ELLIOT AVENUE, SUITE 500	3.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA 98121	3.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUFFO, FRANK A	4.2 NAME	
STREET ADDRESS	3131 ELLIOT AVENUE, SUITE 500	4.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA 98121	4.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WITTE, GARY D	5.2 NAME	
STREET ADDRESS	3131 ELLIOTT AVE., STE 500	5.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA 98121	5.4 CITY-ST-ZIP	
TITLE	VP <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BICKFORD, MICHELLE A	6.2 NAME	
STREET ADDRESS	3131 ELLIOTT AVE., STE 500	6.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA 98121	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 in an attachment with an address, with all other like empowered.

SIGNATURE:  **KELLY J. PRICE**
 Vice President of Finance 1-25-99 (206) 298-2909

CRZE034 (11/98)