

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90044 013 ***150.00

DOCUMENT # F97000002374

1. Entity Name

AMERICAN RETIREMENT CORPORATION

Principal Place of Business

Mailing Address

111 WESTWOOD PLACE, #402
 BRENTWOOD TN 37027

111 WESTWOOD PLACE, #402
 BRENTWOOD TN 37027

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Ste 200

Suite, Apt. #, etc.

Ste 200

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

62-1674303

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
CEO SHERIFF, W E	111 WESTWOOD PLACE, #402	BRENTWOOD TN 37027	<input type="checkbox"/>
EVP KAESTNER, H T	111 WESTWOOD PLACE, #402	BRENTWOOD TN 37027	<input type="checkbox"/>
EVP MONEY, JAMES T	111 WESTWOOD PLACE, #402	BRENTWOOD TN 37027	<input type="checkbox"/>
EVP HICKS, GEORGE T	111 WESTWOOD PLACE, #402	BRENTWOOD TN 37027	<input type="checkbox"/>
SRVP DOWNS, TOM	111 WESTWOOD PLACE, #402	BRENTWOOD TN 37027	<input checked="" type="checkbox"/>
SRVP MCKNIGHT, LEE	111 WESTWOOD PLACE, #402	BRENTWOOD TN 37027	<input checked="" type="checkbox"/>

TITLE NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	111 Westwood Place, Ste 200		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	111 Westwood Place, Ste 200		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	111 Westwood Place, Ste 200		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	111 Westwood Place, Ste 200		<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
P Coates, Christopher J	111 Westwood Place, Ste 200	Brentwood, TN 37027	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-11-01

Date

615 221 2260

Daytime Phone #

CR2E034 (10/00)