


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90074 009 ***150.00

DOCUMENT # F97000004438

1. Entity Name
BROOKDALE LIVING COMMUNITIES OF FLORIDA, INC.



Principal Place of Business 6100 COMMON CIRCLE WEST PALM BEACH, FL 33417 US	Mailing Address C/O BROOKDALE LIVING COMMUNITIES, INC. 330 N WABASH AVE #1400 CHICAGO, IL 60611 US
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40075418



2. Principal Place of Business - No P.O. Box # 330 North Wabash	3. Mailing Address Suite, Apt. #, etc. Suite 1400
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01102007 Chg-P CR2E034 (12/06)

City & State Chicago, IL	City & State
Zip 60611	Country USA

4. FEI Number 36-4174024	Applied For <input type="checkbox"/> Not Applicable
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6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SO PINE ISLAND RD PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHULTE, MARK J 330 N WABASH AVE #1400 CHICAGO, IL 60611 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Co-CEO/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS PASKIN, DEBORAH P 330 N WABASH AVE #1400 CHICAGO, IL 60611 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/S T. Andrew Smith 111 Westwood Drive, #200 Brentwood, TN 37027 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT YOUNG, STANLEY R 330 N WABASH AVE #1400 CHICAGO, IL 60611 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Co-CEO/D W.E. Sheriff 111 Westwood Drive, #200 Brentwood, TN 37027 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RIJOS, JOHN P 330 N WABASH AVE #1400 CHICAGO, IL 60611 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Co-President/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP OHLENDORF, MARK W 6737 W. WASHINGTON STREET, #2300 MILWAUKEE, WI 53214 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Co-President/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FERGE, KRISTEN 6737 W. WASHINGTON STREET, #2300 MILWAUKEE, WI 53214 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: By:  **John P. Rijos, Co-President** 04/10/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #