

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1002

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 NOV -3 AM 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F98000002517

1. Corporation Name

SUMMERVILLE AT PORT ORANGE, INC.

Principal Place of Business

Mailing Address

5285 SHAWNEE RD., STE. 401
ALEXANDRIA VA 22312

5285 SHAWNEE RD., STE. 401
ALEXANDRIA VA 22312



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT

2000

2. New Principal Office Address, If Applicable

3000 Executive Parkway

Suite, Apt. #, etc.

Suite 530

City & State

San Ramon, CA

Zip

94583

Country

USA

3. New Mailing Office Address, If Applicable

3000 Executive Parkway

Suite, Apt. #, etc.

Suite 530

City & State

San Ramon, CA

Zip

94583

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

05/04/1998

5. FEI Number

52-2103425

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PTD	RAGLAND, RUSSELL D	5285 SHAWNEE RD., STE. 401	ALEXANDRIA VA 22312
CSD	HEIMBOLD, ARTHUR	5285 SHAWNEE RD., STE. 401	ALEXANDRIA VA 22312
C	Heimbold, Arthur	3000 Executive Parkway, STE 530	San Ramon, CA 94583
P/CEO	Cobb, Granger	3000 Executive Parkway, STE 530	San Ramon, CA 94583

200003463872--4
-11/15/00--01032--020
****750.00 ****750.00

8. Name and Address of Current Registered Agent

HIQ CORPORATE SERVICES, INC.
526 E. PARK AVE.
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name

LS

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Roxanne D. Monrovia, Corp. Sec'y of HIQ
REGISTERED AGENT MUST SIGN

Date

11/2/00

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Handwritten Signature]

11/1/00

Date

Daytime Phone #

CR2E040 (8/00)

2002

**Summerville Senior Living
Board of Directors**

- Arthur Heimbold
Summerville Senior Living
5285 Shawnee Road
Suite 401
Alexandria, VA 22312
(703) 813-2500
- Granger Cobb
Summerville Senior Living
3000 Executive Parkway
Suite 530
San Ramon, CA 94583
(925) 866-1999
- Stuart Koenig
Apollo Real Estate Advisors, L.P.
1301 Avenue of the Americas
38th Floor
New York, NY 10019
(212) 515-3200
- Bill Benjamin
Apollo Real Estate Advisors, L.P.
1301 Avenue of the Americas
38th Floor
New York, NY 10019
(212) 515-3200
- Lee Neibart
Apollo Real Estate Advisors, L.P.
1301 Avenue of the Americas
38th Floor
New York, NY 10019
(212) 515-3200
- Dr. Howard Gardner
New England Neurological Associates, P.C.
220 Sutton Street
North Andover, MA 01845
(978) 687-2321