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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # **F98000006666**
 1. Corporation Name
ARC LADY LAKE, INC.

Principal Place of Business: 111 WESTWOOD PLACE, SUITE 402 BRENTWOOD TN 37027
 Mailing Address: 111 WESTWOOD PLACE, SUITE 402 BRENTWOOD TN 37027



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields.

3. Date Incorporated or Qualified: 12/08/1998
 4. FEI Number: APPLIED FOR 62-
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
 8. This corporation owes the current year Intangible Personal Property Tax: Yes No

9. Name and Address of Current Registered Agent
NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent (81-85)

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: 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	NAME	1.1 TITLE	DATE
CEOC	SHERR, W E	1.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	111 WESTWOOD PLACE, SUITE 402 BRENTWOOD TN 37027	1.3 STREET ADDRESS	
		1.4 CITY-ST-ZIP	
EV	KAESTNER, H. T	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	111 WESTWOOD PLACE, SUITE 402 BRENTWOOD TN 37027	2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
EV	MONEY, JAMES T	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	111 WESTWOOD PLACE, SUITE 402 BRENTWOOD TN 37027	3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
S	HICKS, GEORGE T	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	111 WESTWOOD PLACE, SUITE 402 BRENTWOOD TN 37027	4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
V	DOWNS, TOM	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	111 WESTWOOD PLACE, SUITE 402 BRENTWOOD TN 37027	5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
V	MCKNIGHT, LEE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	111 WESTWOOD PLACE, SUITE 402 BRENTWOOD TN 37027	6.2 NAME	
		6.3 STREET ADDRESS	
		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 on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: 2-3-99 615 221 2260

CR2E034 (11/98)