LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS			99 HAY -3 PH 3:52					
\$ 188.			T OF STATE	TILL THE	êr i _{kî}	RUDA		
SENIOR LIFESTYLE MANAGEMENT, L.L.C. 5327 N. SHERIDAN ROAD CHICAGO IL 60640				1a. Principal Place of Business Address 5327 N. SHERIDAN ROAD CHICAGO IL 60640				
2. Princip	al Place of Business 2a. M	ailing Address		3. Date Organize	ed or Qualified	3a. State	of Formation	
III E. (Wacker Dr. III a	E. Wacke D	Wacke Dr.		02/17/1998		DE	
		te 2400 State	2400 4. F		4. FEI Number		Applied For	
Chy a Sia		cuyo, IL	I		74~2837251 5. Date of Last Report		Not Applicable	
Country Zip J 60601			5 A	S. Date of Last Nepolt		6. Certificate of Status Desired S8 75 Additional Fee Required		
<u> </u>				Name and Address of New Registered Agent/Office				
TALLAHASSEE FL 32311			Street Address (P.O. Box Number is Not Acceptable)					
			Suite, Apt. #, etc.					
			City		FL	Zip Code		
its register	ant to the provisions of Sections 608.416 and 608.5 red office or registered agent, or both, in the State of tred agent, and accept the obligations.							
SIGNATU	IRE				DATE			
(Registered Agent Accepting Appointment) (NOTE Registered Agent sign 10. Title Managing Members/Managers Bus			ess Street Address		City, State and Zip Code			
vap.	WARTAN MITTATAN R	III E. Wacl			CHICACO II			
MGR MGR	KAPLAN, WILLIAM B NETZKY, THEODORE P		1116 Wacker Dr. Sui 5327 N. SHERIDAN ROA 5327 N. SHERIDAN ROA			CHICAGO IL CHICAGO IL		
MGR	KLINGHER, MICHAEL	85 BROAD			[
MGR	ROTHENBERG, STUART		85 BROAD STREET C/O		NEW YORK NY			
				70	-05/13	3/930	:207)1008005 ****197.5	
	reby certify that the information supplied with this filir on this annual report is true and accurate and that n bility company or the receiver or trustee empowered	ly signature shall have the	same legal effect as	if made under oath	that I am a mar	aging meml	ber or manager of the	

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