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May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N04792 (0)
1. Corporation Name
HANLEY - HAZELDEN CENTER AT ST. MARY'S, INC.



Principal Place of Business 5200 EAST AVENUE W PALM BCH.F L. 33407	Mailing Address 5200 EAST AVENUE W PALM BCH.F L. 33407
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3. Date Incorporated or Qualified 08/20/1984	
4. FEI Number 59-2500657	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable

21. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 25. Suite, Apt. #, etc. 26. City & State 27. Zip 28. Country
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent
**PLANT, TIMOTHY D.
5200 EAST AVENUE
W PALM BCH.F L. FL 33407**

10. Name and Address of New Registered Agent
81. Name
Jeremiah A. Singleton
82. Street Address (P.O. Box Number is Not Acceptable)
5200 East Avenue
83. City
West Palm Beach 84. State
FL 85. Zip Code
33407

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: *Jeremiah A. Singleton* (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD CHESTER, DON 901 45TH ST. W. PALM BCH. FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Secretary Terry Lehman 5200 East Avenue West Palm Beach, FL 33407
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ROSSIN, THOMAS 505 SOUTH FLAGLER DRIVE, SUITE #1001 WEST PALM BEACH FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	CD Caudill, Richard 702 Admiralty Center, 4400 PGA Blvd Palm Beach Gardens, FL 33410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LEWIS, LEANN 15245 PLEASANT VALLEY ROAD CENTER CITY MN	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PLANT, TIMOTHY D 5200 EAST AVENUE WEST PALM BEACH FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCHIKS, MICHAEL 15245 PLEASANT VALLEY RD CENTER CITY MN	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	President Schiks, Michael 15245 Pleasant Valley RD Center City, MN. 55045
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SINGLETON, JEREMIAH A 5200 EAST AVENUE W. PALM BCH. FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Vice President Singleton, Jeremiah A 5200 East Avenue West Palm Beach, FL 33407

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(9)(f), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *LeAnn Lewis* 1/28/98 (612) 212-4260

CR2E037 (10/97)