

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 839014

1. Entity Name

LIFE CARE RETIREMENT COMMUNITIES, INC.

**FILED**  
**Jul 19, 2000 8:00 am**  
**Secretary of State**

07-19-2000 90012 003 \*\*\*\*70.00

Principal Place of Business

200 E. GRAND AVENUE  
390  
DES MOINES IA 50309-1800  
US

Mailing Address

1600 HUB TOWER  
699 WALNUT  
DES MOINES IA 50309

2. Principal Place of Business

100 E. Grand Avenue

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 230

City & State

Des Moines, IA

City & State

4. FEI Number

42-1068850

Applied For

Not Applicable

Zip

50309

Country

US

Zip

Country

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
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

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**After September 13, 2000 min. will be \$236.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

TITLE CD ☐ Delete  
NAME DICKINSON, L CALL, JR  
STREET ADDRESS 3737 SOUTHERN HILLS DRIVE  
CITY-ST-ZIP DES MOINES IA 50321

TITLE D ☐ Delete  
NAME CARVER, GARLAND K  
STREET ADDRESS 7305 RIDGEMONT  
CITY-ST-ZIP URBANDALE IA 50322

TITLE PD ☐ Delete  
NAME KADUCE, JOHN J.  
STREET ADDRESS 200 E GRAND AVE, S390  
CITY-ST-ZIP DES MOINES IA

TITLE D ☐ Delete  
NAME ZEFRON, MIANNE  
STREET ADDRESS 147-34TH STREET  
CITY-ST-ZIP DES MOINES IA 50312

TITLE D ☐ Delete  
NAME STAUFFER, WILLIAM A.  
STREET ADDRESS 3920 GRAND AVE., SOUTH 301  
CITY-ST-ZIP DES MOINES IA 50312

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Change ☐ Addition  
NAME Dickinson, L. Call, Jr.  
STREET ADDRESS 3737 Southern Hills Drive  
CITY-ST-ZIP Des Moines, IA 50321

TITLE CD ☒ Change ☐ Addition  
NAME Carver, Garland K.  
STREET ADDRESS 7305 Ridgemont  
CITY-ST-ZIP Urbandale, IA-50322

TITLE PD ☒ Change ☐ Addition  
NAME Kaduce, John J.  
STREET ADDRESS 100 E. Grand Avenue, Suite 230  
CITY-ST-ZIP Des Moines, IA 50309

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD ☐ Change ☒ Addition  
NAME Foreman, Merlin J.  
STREET ADDRESS 6019 Weybridge  
CITY-ST-ZIP Johnston, IA 50131

12. 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 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 617, 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:

**SIGNATURE REQUIRED**

(515) 288-5805

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)

attachment

839014

06103348

**LIFE CARE RETIREMENT COMMUNITIES, INC.**  
**CORPORATE NUMBER: 839014**  
**2000 ADDITIONAL OFFICER/DIRECTOR LIST**

TITLE: S NAME: CODER, SYDNEY J.  
4505 - 73<sup>RD</sup> STREET  
URBANDALE, IA 50322

TITLE: D- NAME: BOURNE, DONALD W.  
440 IRON HILL STREET  
PLEASANT HILL, CA 94523-5602

TITLE: VD NAME: PIERSON, ERNEST C.  
112 HOMEDALE ROAD  
HOPKINS, MN 55343