2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #: A98000002870

1. Entity Name
Hatton House Senior Housing Partners, LTD

FILED
01 JUL -9 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
1333 La Paz Street Pensacola, FL 32501	196 Technology Dr STE D Irvine, CA 92618

2. Principal Place of Business	3. Mailing Address
8097 N. 3Rd. Ave	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sneads, Florida	City & State
Zip: 32460 / Country:	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3548587 — Applied For / Not Applicable

5. Certificate of Status Desired ☒ — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301-2525

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 ____________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. $100.00

10. Amount of Capital Contributions in FLORIDA to date. $100.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE. SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	A99000001291	STREET ADDRESS	
NAME	RHT Hatton House, Limited Partnership	CITY-ST-ZIP	600004484146--2
STREET ADDRESS	1333 LaPaz Street		-07/18/01--01029--029
CITY-ST-ZIP	~~Pensacola, FL 32501~~		****141.25 ****141.25
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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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: [signature] — 4-27-01 — 949-450-1113
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

General Partner of RHT Hatton House, Limited Partnership

CR2E003 (11/00)