

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2002 8:00 am
Secretary of State

03-22-2002 90061 030 ***150.00

DOCUMENT # F01000001272

1. Entity Name
HEARTHSTONE ASSISTED LIVING, INC.

Principal Place of Business **Mailing Address**
3363 N. SAM HOUSTON PARKWAY EAST, STE. 600 **3363 N. SAM HOUSTON PARKWAY EAST, STE. 600**
HOUSTON TX 77032 **HOUSTON TX 77032**

2. Principal Place of Business **3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

75-0475909

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CAPITAL CORPORATE SERVICES, INC.
1333 NORTH DUVAL STREET
TALLAHASSEE FL 32303

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐
 Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PCEO** ☐ Delete
NAME **HEKKER, TIMOTHY**
STREET ADDRESS **3363 N. SAM HOUSTON PARKWAY EAST, STE. 600**
CITY-ST-ZIP **HOUSTON TX 77032**

TITLE **D/P/CEO** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VCFO** ☐ Delete
NAME **WANG, JAMES**
STREET ADDRESS **3363 N. SAM HOUSTON PARKWAY EAST, STE. 600**
CITY-ST-ZIP **HOUSTON TX 77032**

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

TITLE **V** ☐ Delete
NAME **SCHILL, LLOYD**
STREET ADDRESS **3363 N. SAM HOUSTON PARKWAY EAST, STE. 600**
CITY-ST-ZIP **HOUSTON TX 77032**

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

TITLE **V** ☐ Delete
NAME **ROSENBERG, RICHARD**
STREET ADDRESS **3363 N. SAM HOUSTON PARKWAY EAST, STE. 600**
CITY-ST-ZIP **HOUSTON TX 77032**

TITLE **V/S** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☒ Delete
NAME **STARR, ANDREW**
STREET ADDRESS **3363 N. SAM HOUSTON PARKWAY EAST, STE. 600**
CITY-ST-ZIP **HOUSTON TX 77032**

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

TITLE **V** ☐ Delete
NAME **DASPT, LAURENCE**
STREET ADDRESS **3363 N. SAM HOUSTON PARKWAY EAST, STE. 600**
CITY-ST-ZIP **HOUSTON TX 77032**

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard Rosenberg*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-02

Date

281-227-4602

Daytime Phone #

CR2E034 (9/01)

Attachment # FO1000001272
932871

Additional Directors

Title D
Name Daniel C. Arnold
Street Address 1001 Fannin Street, Suite 720
City, State, Zip Houston, TX 77002-6707

Title D
Name Mark Brookner
Street Address 3040 Post Oak Blvd., Suite 700
City, State, Zip Houston, TX 77056

Title D
Name George M. Jenkins
Street Address 445 Park Avenue
City, State, Zip New York, NY 10022

Title D
Name Frederick P. Zarrilli
Street Address 375 Park Avenue, Suite 3101
City, State, Zip New York, NY 10022

Title D
Name Steven M. Sandholtz
Street Address 199 Fremont Street, Suite 3500
City, State, Zip San Francisco, CA 94105

Title D
Name Claude J. Zinngrabe, Jr.
Street Address 199 Fremont Street, Suite 3500
City, State, Zip San Francisco, CA 94105

Title D
Name James E. Eden
Street Address 3395 North Pines Way, Suite 102
City, State, Zip Wilson, WY 83014

Title D
Name Steven A. Karpf
Street Address 375 Park Avenue, Suite 3101
City, State, Zip New York, NY 10152

Title D
Name Matthew Reidy
Street Address 199 Fremont Street, Suite 3500
City, State, Zip San Francisco, CA 94105