

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000374

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** FAIRFAX SENIOR LIVING COMPANY

**Current Principal Place of Business:**

10387 MAIN STREET  
SUITE 200  
FAIRFAX, VA 22030

**New Principal Place of Business:**

**Current Mailing Address:**

10387 MAIN STREET  
SUITE 200  
FAIRFAX, VA 22030

**New Mailing Address:**

**FEI Number:** 54-1959103

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ROSS, BRIAN M  
12027 WHITMARSH LANE  
TAMPA, FL 33626 US

**Name and Address of New Registered Agent:**

ROSS, BRIAN M ESQ.  
5010 W. CARMEN STREET  
SUITE 2602  
TAMPA, FL 33609 US

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: BRIAN M ROSS, ESQ

04/28/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HOSTLER, ROBERT P  
Address: 10387 MAIN STREET, SUITE 200  
City-St-Zip: FAIRFAX, VA 22030

Title: D  
Name: LEE, THOMAS K  
Address: 10387 MAIN STREET, SUITE 200  
City-St-Zip: FAIRFAX, VA 22030

Title: D  
Name: CWIEK, WILLIAM W  
Address: 10387 MAIN STREET, SUITE 200  
City-St-Zip: FAIRFAX, VA 22030

Title: S  
Name: PURDUM, JIM S  
Address: 10387 MAIN STREET, SUITE 200  
City-St-Zip: FAIRFAX, VA 22030

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT P HOSTLER

PD

04/28/2010

Electronic Signature of Signing Officer or Director

Date