

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005235

FILED  
Feb 27, 2008  
Secretary of State

Entity Name: LIFE MASTERS SUPPORTED SELF CARE, INC.

## Current Principal Place of Business:

5000 SHORELINE COURT, SUITE 300  
SOUTH SAN FRANCISCO, CA 94080

## New Principal Place of Business:

15635 ALTON PARKWAY, SUITE 400  
IRVINE, CA 92618

## Current Mailing Address:

15635 ALTON PARKWAY, SUITE 400  
ATTN: BETSY CHRISTIE  
IRVINE, CA 92618

## New Mailing Address:

FEI Number: 94-3206428      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: STRAND, DAVID R  
Address: 5000 SHORELINE COURT, SUITE 300  
City-St-Zip: SOUTH SAN FRANCISCO, CA 94080

Title: CFO ( ) Delete  
Name: MORRIS, DEBRA L  
Address: 15635 ALTON PARKWAY, SUITE 400  
City-St-Zip: IRVINE, CA 92618

Title: D ( ) Delete  
Name: CROUCH, LAYTON R  
Address: 16830 VENTURA BOULEVARD, SUITE 244  
City-St-Zip: ENCINO, CA 91436

Title: D ( ) Delete  
Name: HIGGINS, KENNETH E  
Address: 50 SOUTH SIXTH STREET, SUITE 1390  
City-St-Zip: MINNEAPOLIS, MN 554027020

Title: EC ( ) Delete  
Name: SELECKY, CHRISTOBEL E  
Address: 15635 ALTON PARKWAY, SUITE 400  
City-St-Zip: IRVINE, CA 92618

Title: D ( ) Delete  
Name: SNYDERMAN, RALPH MD  
Address: DUMC BOX 3059  
City-St-Zip: DURHAM, NC 27710

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: SELECKY, CHRISTOBEL E  
Address: 15635 ALTON PARKWAY, SUITE 400  
City-St-Zip: IRVINE, CA 96218

Title: CFO (X) Change ( ) Addition  
Name: KANZLER, DAVID  
Address: 15635 ALTON PARKWAY, SUITE 400  
City-St-Zip: IRVINE, CA 92618

Title: D (X) Change ( ) Addition  
Name: LAUB, MARGARET P  
Address: 10037 NORTH 96TH WAY  
City-St-Zip: SCOTTSDALE, AZ 91436

Title: D (X) Change ( ) Addition  
Name: KURTIN, EVE M  
Address: 16830 VENTURA BLVD, SUITE 244  
City-St-Zip: ENCINO, CA 91436

Title: D (X) Change ( ) Addition  
Name: COGAN, GIL  
Address: 2730 SAND HILL ROAD, SUITE 150  
City-St-Zip: MENLO PARK, CA 94025

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BETSY CHRISTIE

VP

02/27/2008

Electronic Signature of Signing Officer or Director

Date