

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathern
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 05 1996 8:00 am
Secretary of State

DOCUMENT # F93000002999 (1)

1. Corporation Name

LIVING CENTERS HOLDING COMPANY

Principal Place of Business

15415 KATY FREEWAY, SUITE 800
HOUSTON TX 77094

Mailing Address

15415 KATY FREEWAY, SUITE 800
HOUSTON TX 77094

2. Principal Place of Business

21 Sub, Apt, R, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Sub, Apt, R, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

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

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 119.07, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in this State. If such change was a change of the corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. NAME
D KUNTZ, EDWARD L
2. STREET ADDRESS
15415 KATY FREEWAY, SUITE 800
3. CITY, ST, ZIP
HOUSTON TX 77094

1. NAME
D WILLIAMS, LEROY D
2. STREET ADDRESS
15415 KATY FREEWAY, SUITE 800
3. CITY, ST, ZIP
HOUSTON TX 77094

1. NAME
P FRANK, C W
2. STREET ADDRESS
15415 KATY FREEWAY, SUITE 800
3. CITY, ST, ZIP
HOUSTON TX 77094

1. NAME
AS BOONE, SYDNEY K JR.
2. STREET ADDRESS
15415 KATY FREEWAY, SUITE 800
3. CITY, ST, ZIP
HOUSTON TX 77094

1. NAME
[] DELETE
2. STREET ADDRESS
[] DELETE
3. CITY, ST, ZIP
[] DELETE

1. NAME
[] DELETE
2. STREET ADDRESS
[] DELETE
3. CITY, ST, ZIP
[] DELETE

14. I do hereby certify that the information supplied with this form is true and correct, 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 officer or business employee to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed from the data furnished in Block 11.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

C. W. FRANK

3. Date Incorporated or Qualified 06/29/1993	3a. Date of Last Report 05/01/1995
4. FEI Number 76-0405596	Applied for Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☒ Yes ☐ No	
10. Name and Address of New Registered Agent	

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	☐ Change ☐ Addition
1. NAME	
2. STREET ADDRESS	
3. CITY, ST, ZIP	
4. NAME	
5. STREET ADDRESS	
6. CITY, ST, ZIP	
7. NAME	
8. STREET ADDRESS	
9. CITY, ST, ZIP	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. NAME	
14. STREET ADDRESS	
15. CITY, ST, ZIP	

3/29/96

(713) 578-4600

CR2E034 (12/95)