

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90175 046 ***150.00

DOCUMENT # F94000002855
1. Entity Name
SUNRISE ASSISTED LIVING INVESTMENTS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7902 WESTPARK DR.
Suite, Apt. #, etc.

3. Mailing Address
7902 WESTPARK DR.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MCLEAN, VA.

City & State
MCLEAN, VA.

4. FEI Number
54-1674683

Zip
22102

Country
USA

Zip
22102

Country
USA

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name
CT CORPORATION SYSTEM
Street Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND ROAD
City
PLANTATION FL Zip Code
33324

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

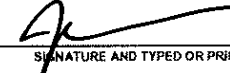
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
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			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR/PRESIDENT KLAASSEN, PAUL J. 7902 WESTPARK DR. MCLEAN, VA. 22102	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR/SEC/TREA. KLAASSEN, TERESA M. 7902 WESTPARK DR. MCLEAN, VA. 22102	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT NEWEL, THOMAS B. 7902 WESTPARK DR. MCLEAN, VA. 22102	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASS. SECRETARY MYERS BENTON, JULIAN S. 7902 WESTPARK DR. MCLEAN, VA 22102	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT POPE, JAMES S. 7902 WESTPARK DR. MCLEAN, VA. 22102	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT GORHAM, DANIEL B. 7902 WESTPARK DR. MCLEAN, VA. 22102	TITLE 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)(b), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **JULIAN MYERS BENTON** **4/19/02** **(703) 744-1889**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #

CR2E034B (12/01)