FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500006331 (1)

LIVING CENTERS - SOUTHEAST, INC.

Principal Place of Business

Mailing Address

FILED Feb 11 1998 8:00am Secretary of State



15415 KATY HOUSTON TO		15415 KATY FRWY #800 HOUSTON TX 77094				
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 12/29/1995	
	lace of Business	2a. Mailing Address				pplied For
	Ravinia brive	26 One Ravinia	1_pr	ive	56-0997245	lot Applicable
Suite, Apt. #, etc. 22 Suite 1500 27 Suite 1500					I D. Cenincale oralatus Desireo I I	Additional lequired
City & Stat	, -	City & State			6. Election Campaign Financing \$5.00	May Be
23 A+1	anta, GA	28 A+IAn+A,	_GF	r		to Fees
Zip_	Country	Zip	Country		8. This corporation owes or has paid the current year In	tangible
24 303		29 30346 30	o US	<u>A</u>		□ No
	9. Name and Address of Current	Registered Agent	-	Г.,	10. Name and Address of New Registered Agent	
	CORPORATION SYSTEM		81	Name		
1200 SOUTH PINE ISLAND ROAD			82 Street Address (P.O. Box Number is Not Acceptable)			
PU	ANTATION FL 33324					
			63			
			84	City	FL 85 Zip	Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above parent correction submits this statement for the purpose of above its registered.						
agent. I am lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	RS IN 12
TITLE	D	⋈ DELETE	1.1 TITLE		□ Change	X Addition
NAME	KUNTZ, EDWARD L		1.2 NAME		Charles Carden	1
STREET ADDRESS	15415 KATY FRWY #800		1.3 STREET	ADDRESS	Charles Carden one Ravinia Drive, Suite 150	D
CITY-ST-ZIP	HOUSTON TX 77094		1.4 CITY-ST-ZIP		Atlanta, GA 30346	
TITLE	D A STOLE OF THE S	☐ DELET e	2.1 TITLE		X Change	Addition
NAME	WILLIAMS, LEROY D		2.2 NAME		0.33 834 634	_
STREET ADDRESS	15415 KATY FRWY #800		2.3 STREET	ADDRESS	one Ravinia Drive, Suite 15	>0 D
CITY-ST-ZIP	HOUSTON TX 77094		2.4 CITY-S	T-ZIP	Allanta, GA 30346	
TITLE	r Her i o	☐ DELETE	3 1 TITLE		🔀 Change	☐ Addition
NAME	LEE, J. D.		3.2 NAME			
STREET ADDRESS	15415 KATY FRWY #800		3.3 STREET	ADDRESS		200
CITY-ST-ZIP	HOUSTON TX 77094		3.4. CITY - S	T-ZIP	Atlanta, GA 30346	
TITLE	ACTUDA BUAN D	□ DELET e	4.1 TITLE		Change	Addition
NAME	GENTRY, BOYD P		4. 2 NAME		one Ravinia Drive, Suite	1500
STREET ADDRESS	15415 KATY FRWY #800 HOUSTON TX		4.3 STREET	ADDRESS		,
CITY-ST-ZIP			4.4 CITY - ST	- ZIP	Atlanta, GA 30346	
TITLE	VS BOONE, SYDNEY K JR	☐ DELETE	5.1 TITLE		Change	Addition
NAME	15415 KATY FRWY #800		52 NAME		One Ravinia Drive, Suite 1	500
STREET ADDRESS			5.3 STREET	ADDRESS	une knymm brives dans h	
CITY-ST-ZIP	HOUSTON TX 77094	7	5.4 CITY - ST	- ZIP	1111ANTH, 617 30376	
TITLE		LJ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			1
STREET ADDRESS	·		6.3 STREET	ADDRESS		
CITY-ST-ZIP	outiful that the information	Alais Africa alice at the control of	6.4 CITY ST			
14. 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 annual report or supplemental annual 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 12 or Block 13 if changed; of on an attachment with an address.						