

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

FILED

**Jan 29 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000001123 (6)
1. Corporation Name
EMERITUS PROPERTIES I, INC.



Principal Place of Business 2003 WESTERN AVE., SUITE 660 SEATTLE WA 98121	Mailing Address 2003 WESTERN AVE., SUITE 660 SEATTLE WA 98121-2177
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3. Date Incorporated or Qualified 03/05/1996	3a. Date of Last Report
4. FEI Number APPLIED FOR 91-1712691	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 3131 Elliott Ave. #500 Suite, Apt. #, etc	2a. Mailing Address 26 3131 Elliott Ave. Suite, Apt. #, etc
22 City & State 23 Seattle, WA	27 City & State 28 Seattle, WA
24 Zip 98121 Country USA	29 Zip 98121 Country USA

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE FL 32301	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
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	CPT <input type="checkbox"/> DELETE
NAME	BRANDSTROM, RAYMOND R
STREET ADDRESS	2003 WESTERN AVE., SUITE 660
CITY-ST-ZIP	SEATTLE WA 98121
TITLE	V <input type="checkbox"/> DELETE
NAME	RUFFO, FRANK A
STREET ADDRESS	2003 WESTERN AVE., SUITE 660
CITY-ST-ZIP	SEATTLE WA 98121
TITLE	S <input type="checkbox"/> DELETE
NAME	PRICE, KELLY J
STREET ADDRESS	2003 WESTERN AVE., SUITE 660
CITY-ST-ZIP	SEATTLE WA 98121
TITLE	V <input checked="" type="checkbox"/> DELETE
NAME	CLAUNCH, LARRY L
STREET ADDRESS	2003 WESTERN AVE., SUITE 660
CITY-ST-ZIP	SEATTLE WA 98121
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	3131 Elliott Ave. #500
1.4 CITY-ST-ZIP	Seattle, WA 98121
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	3131 Elliott Ave. #500
2.4 CITY-ST-ZIP	Seattle, WA 98121
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	3131 Elliott Ave. #500
3.4 CITY-ST-ZIP	Seattle, WA 98121
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Vice President
4.3 STREET ADDRESS	Gary D. Witte
4.4 CITY-ST-ZIP	3131 Elliott Ave. #500 Seattle, WA 98121
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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, or on an attachment with an address.

SIGNATURE: *[Signature]* **1-20-97** **206-298-2909**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)