

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 MAR -3 PM 1:28

Mc 3/3

DOCUMENT # F96000003560

1. Corporation Name

ARIZONA BAPTIST RETIREMENT CENTERS, INC.

Principal Place of Business

Mailing Address

1313 EAST OSBORN ROAD
SUITE 180
PHOENIX, AZ 85014

1313 EAST OSBORN ROAD
SUITE 180
PHOENIX, AZ 85014

3. Date Incorporated or Qualified
07/15/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

23-7458267

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION
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 617.0502 and 617.1508, 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 617.0503, 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 DIRECTORS

TITLE P
NAME ELLIS, DAVID B.
STREET ADDRESS 326 E. ECHO LANE
CITY-STATE-ZIP PHOENIX AZ 85021 ☐ DELETE

TITLE S
NAME GRABINSKI, THOMAS D
STREET ADDRESS 2010 E. BENDIX
CITY-STATE-ZIP TEMPE AZ 85283 ☐ DELETE

TITLE V
NAME YOUNG, SUE J
STREET ADDRESS 7229 W. EMILE ZOLA
CITY-STATE-ZIP PEORIA, AZ 85381 ☐ DELETE

TITLE CEO
NAME JAKES, P. DAVID
STREET ADDRESS 6404 W. SHANGRI-LA
CITY-STATE-ZIP GLENDALE AZ 85304 ☒ DELETE

TITLE VT
NAME RICHARDS, TERRY A
STREET ADDRESS 5420 W. WILLOW AVE
CITY-STATE-ZIP GLENDALE AZ 85304 ☒ DELETE

TITLE V
NAME WHEATLEY, E. DWAIN
STREET ADDRESS 8352 W. ROSEMONTE
CITY-STATE-ZIP PEORIA, AZ 85382 ☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/CEO
1.2 NAME ELLIS, DAVID B.
1.3 STREET ADDRESS 326 E. ECHO LANE
1.4 CITY-STATE-ZIP PHOENIX AZ 85021 ☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP
500002104196--1
-03/04/97--01120--007
*****61.25 *****61.25

3.1 TITLE V
3.2 NAME DOROTHY ROTH
3.3 STREET ADDRESS P O BOX 27536 (V/A)
3.4 CITY-STATE-ZIP PHOENIX, AZ 85061 ☐ Change ☒ Addition

4.1 TITLE S
4.2 NAME KATHLEEN K EDSTROM
4.3 STREET ADDRESS 13146 W CASTLEBAR DRIVE
4.4 CITY-STATE-ZIP SUN CITY WEST, AZ 85375 ☐ Change ☒ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP ☐ Change ☐ Addition

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-28-97

602-222-3333
1-800-266-6363

CR2E037 (9/96)