

Document Number Only
F96000006155

CT CORPORATION SYSTEM

660 EAST JEFFERSON STREET

Requestor's Name
TALLAHASSEE, FL 32301

Address
222-1092

City State Zip Phone

CORPORATION(S) NAME

500002005915--5
-11/15/96--01052--021
*****70.00 *****70.00

W96-24219

Integrated Living Communities of
Brynton Beach

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
96 NOV 15 PM 4:22

FILED

11/15

- ☒ Profit
☐ NonProfit
☐ Limited Liability Co.
☒ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Certified Copy
☐ Call When Ready
☒ Walk In
☐ Mail Out
- ☐ Amendment
☐ Dissolution/Withdrawal
☐ Annual Report
☐ Reservation
☐ Photo Copies
☐ Call if Problem
☐ Will Wait
- ☐ Merger
☐ Mark
☐ Other
☐ Change of R.A.
☐ Fictitious Name Filing
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| Name |
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| Verifier |
| Acknowledgment |
| W.P. Verifier |

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DIVISION OF CORPORATION



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

November 15, 1996

CT SYSTEM

SUBJECT: INTEGRATED LIVING COMMUNITIES OF BOYNTON BEACH, INC.
Ref. Number: W96000024249

We have received your document for INTEGRATED LIVING COMMUNITIES OF BOYNTON BEACH, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6094.

Doug Dickinson
Document Specialist

Letter Number: 396A00052239

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NOV 22 PM 3:01

DIVISION OF CORPORATIONS

*please
back late*

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE
STATE OF FLORIDA:

1. INTEGRATED LIVING COMMUNITIES OF BOYNTON BEACH, INC.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Delaware
(State or country under the law of which it is incorporated)
3. Pending
(FEI number, if applicable)
4. 11/4/96
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.156-1(6).))
7. 24850 Old 41 Road, Ste. 10, Bonita Springs, Florida 34135
(Current mailing address)
8. Management and Operation of Assisted Living Facilities.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent:
Name: C T Corporation System
Office Address: c/o C T Corporation System, 1200 South Pine Island Road
Plantation, Florida, 33324
(Zip Code)

10. Registered agent acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

C T Corporation System

(Registered agent's signature) (Officer)

PETER F. SOUZA
ASSISTANT SECRETARY

(Type Name and Title of Officer)

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TALLAHASSEE, FLORIDA

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: see attached list of directors

Address: _____

Vice Chairman: see attached list of directors

Address: _____

Director: see attached list of directors

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: see attached list of officers

Address: _____

Vice President: _____

Address: _____

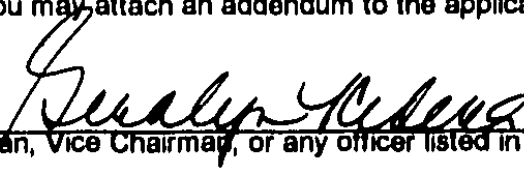
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Geraldyn Kidera / Secretary
(Typed or printed name and capacity of person signing application)

Exhibit A

The following is a list of Officers and Directors for Integrated Living Communities, Inc. and its subsidiaries:

Directors:

| | |
|-------------------|---|
| Robert Elkins | 24850 Old 41 Road, Bonita Springs, FL 34135 |
| Lawrence P. Cirka | 24850 Old 41 Road, Bonita Springs, FL 34135 |
| Luis Bared | 24850 Old 41 Road, Bonita Springs, FL 34135 |
| Charles Laverty | 24850 Old 41 Road, Bonita Springs, FL 34135 |
| Lisa Merritt | 24850 Old 41 Road, Bonita Springs, FL 34135 |
| Edward J. Komp | 24850 Old 41 Road, Bonita Springs, FL 34135 |

Officers:

| | |
|----------------|---|
| Edward J. Komp | President and Chief Executive Officer |
| John Poole | Senior Vice President/Chief Financial Officer/Treasurer |
| Kayda Johnson | Senior Vice President/Chief Operating Officer/Assistant Secretary |
| Kyle Shatterly | Senior Vice President/Acquisition and Development |
| Geralyn Kidera | Secretary |
| Rob Stobo | Assistant Treasurer |

Address for Officers:

24850 Old 41 Road, Bonita Springs, FL 34135

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INTEGRATED LIVING COMMUNITIES OF BOYNTON BEACH, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF NOVEMBER, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

96 NOV 15 PM 4:22
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Edward J. Freel
Edward J. Freel, Secretary of State

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AUTHENTICATION:

DATE:

8189414

11-13-96