

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000925

FILED  
Apr 01, 2008  
Secretary of State

Entity Name: ARV ASSISTED LIVING, INC.

## Current Principal Place of Business:

401 S. FOURTH STREET  
SUITE 1900  
LOUISVILLE, KY 40202

## New Principal Place of Business:

## Current Mailing Address:

401 S. FOURTH STREET  
SUITE 1900  
LOUISVILLE, KY 40202

## New Mailing Address:

FEI Number: 33-0160968

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: MOORE, JOHN  
Address: 401 S. FOURTH STREET, STE 1900  
City-St-Zip: LOUISVILLE, KY 40202

Title: CFO ( ) Delete  
Name: JESSEE, MARK D  
Address: 401 S. FOURTH STREET, SUITE 1900  
City-St-Zip: LOUISVILLE, KY 40202

Title: COO ( ) Delete  
Name: HARDING, JULIE  
Address: 401 S. FOURTH STREET, SUITE 1900  
City-St-Zip: LOUISVILLE, KY 40202

Title: SVP ( ) Delete  
Name: ARMSTRONG, DOUGLAS  
Address: 245 FISCHER AVENUE, STE D-1  
City-St-Zip: COSTA MESA, CA 92626

Title: SEC ( ) Delete  
Name: HUDSON, BRYAN  
Address: 401 S FOURTH STREET, SUITE 1900  
City-St-Zip: LOUISVILLE, KY 40202

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DIR ( ) Change (X) Addition  
Name: KASMAN, JOSEPH D  
Address: 30 ROCKFELLER PLAZA  
City-St-Zip: NEW YORK, NY 10020

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: W. BRYAN HUDSON

SEC

04/01/2008

Electronic Signature of Signing Officer or Director

Date