## 2000 UNIFORM BUSINESS REPORT (UBR) EII ED DOCUMENT # **F98000005333** 1. Entity Name CAPITAL SENIOR LIVING PROPERTIES 2-VERANDA CLUB, Mailing Address Principal Place of Business 14160 DALLAS PARKWAY, SUITE 300 14160 DALLAS PARKWAY, SUITE 300 DALLAS TX 75240-4383 DALLAS TX 75240 3. Mailing Address 2. Principal Place of Business Sulte, Apt. #, etc. Suite, Apt. #, etc. 4. City & State City & State Country Zip Zip Country 5. 6. Name and Address of Current Registered Agent 7. C T\_CORPORATION\_SYSTEM. --Street Address (P.O. I 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 8. The above named entity submits this statement for the purpose of changing its registered office or registered ag SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. (See criteria on back) Make Check Payable to Department of State

	Jul 13, 2000 8:00 am Secretary of State 05-31-2000 90053 047 ***550.00								
DO NOT WRITE IN THIS SPACE									
F	El Number APPLIED FOR Applied For Not Applicable								
C	Certificate of Status Desired								
N	Name and Address of New Registered Agent								
30	ox Number is Not Acceptable)	-							
	FL Zip Code								
	ent, or both, in the State of Florida.								
e	instating) DATE								
	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees								

11.	OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	PD ·	☐ Delete	TITLE		Change	Addition
NAME	JOHANNESSEN, KEITH N		NAME			
STREET ADDRESS	14160 DALLAS PARKWAY, SUITE 300		STREET ADDRESS			
CITY-ST-ZIP	DALLAS TX 75240		CITY-ST-ZIP	·		
TITLE	VSD	☐ Delete	TITLE		Change	Addition
NAME	BRICKMAN, DAVID R		NAME			
STREET ADDRESS	14160 DALLAS PARKWAY, SUITE 300		STREET ADORESS			
CITY-ST-ZIP	_DALLAS_TX_75240		CITY-ST-ZIP		<u></u>	
TITLE	C	☐ Delete	TITLE		Change	☐ Addition
NAME	HOLLISTER, ROBERT F		NAME	:		
STREET ADDRESS	14160 DALLAS PARKWAY, SUITE 300		STREET ADDRESS			
CITY_ST_ZIP	-DALLAS TX 75240		CITY-ST-ZIP	<u></u>		
TITLE	-	Delete	TITLE		Change	☐ Addition
NAME			NAME	•		
STREET ADDRESS	•		STREET ADDRESS			
CITY- ST-ZIP			CITY-ST-ZIP			
IITLE .	1	Delete	TITLE		Change	Addition
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CITY-ST-ZIP			CITY-ST-ZIP			
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NAME			NAME			
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CITY-ST-ZIP	·		CITY-ST-ZIP			
				I - C 440 07/DVI) Clarida Cranda Electron co	حزاه وحطاه بكاني	formation 1

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 of the steel empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment v powered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Data Daytime Phone #