

Division of Corporations

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F99000006571

Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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To: Division of Corporations
Fax Number : (850) 922-4003

From: Kyle L. WhiteJohnson
Account Name : CNL GROUP, INC.
Account Number : 113615003626
Phone : (407) 650-1000
Fax Number : (407) 650-1065

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FOREIGN PROFIT QUALIFICATION

CNL HEALTH CARE LP CORP.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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Acknowledgment

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO 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. CNL HEALTH CARE LP CORP.

(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. Applied for
(FBI number, if applicable)4. December 2, 1999
(Date of incorporation)5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")6. Effective upon acceptance of this application
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)7. 450 S. Orange Avenue
Orlando, Florida 32801-3336
(Current mailing address)8. Please see Attached Addendum "A"
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)Name: Robert A. BourneOffice Address: 450 S. Orange AvenueOrlando, Florida, 32801
(Zip code)

10. Registered agent's 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 obligations of my position as registered agent.


(Registered agent's signature)

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: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)Chairman: James M. Seneff, Jr.Address: 450 S. Orange AvenueOrlando, Florida 32801-3336

Vice Chairman: _____

Address: _____

Director: Robert A. BourneAddress: 450 S. Orange AvenueOrlando, Florida 32801-3336

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)President: Robert A. BourneAddress: 450 S. Orange AvenueOrlando, Florida 32801-3336

Vice President: _____

Address: _____

Secretary: Lynn E. RoseAddress: 450 S. Orange AvenueOrlando, FL 32801-3336Treasurer: Lynn E. RoseAddress: 450 S. Orange AvenueOrlando, FL 32801-3336

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. Robert A. Bourne, President
(Typed or printed name and capacity of person signing application)

CNL HEALTH CARE LP CORP.

ADDENDUM "A"

8. Purposes of corporation

The purpose of the Corporation is to engage in any and all lawful activities permitted under the General Corporation Law, as the same now exists and as hereafter amended.

12. Additional Officers:

Chief Executive Officer

James M. Seneff, Jr.
450 S. Orange Avenue
Orlando, FL 32801-3336

Executive Vice President

Jeanne A. Wall
450 S. Orange Avenue
Orlando, FL 32801-3336

Daniel L. Simmons
450 S. Orange Avenue
Orlando, FL 32801-3336

Assistant Secretary

Kyle L. WhiteJohnson
450 S. Orange Avenue
Orlando, FL 32801-3336

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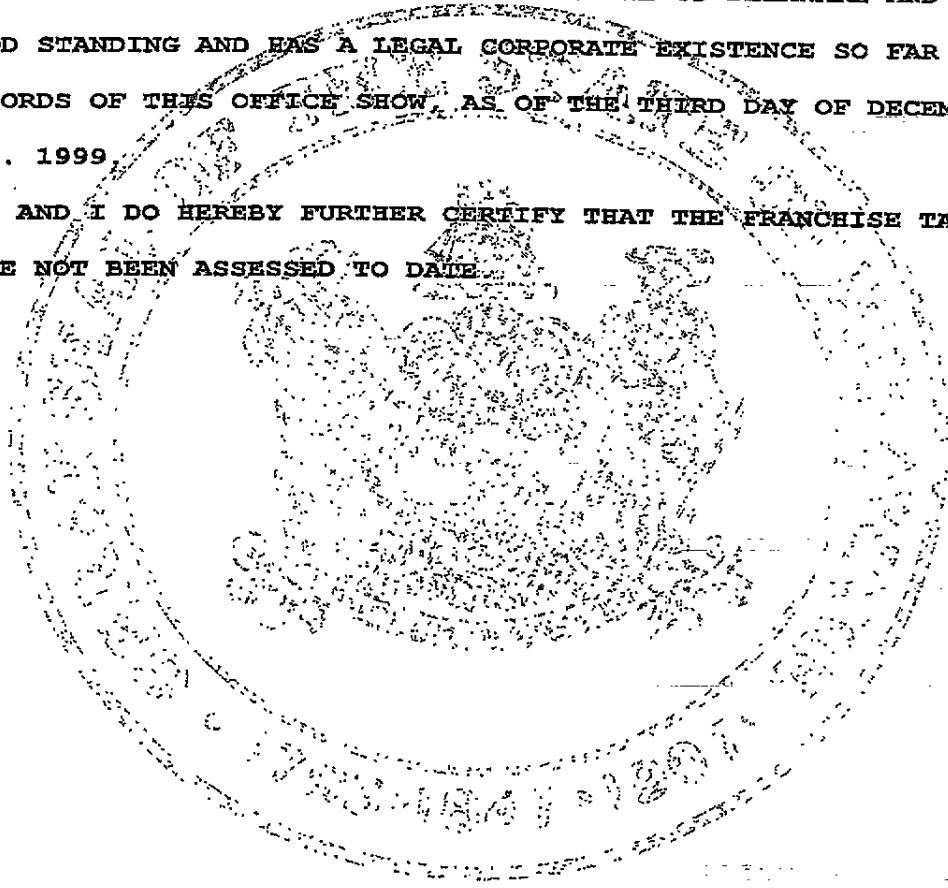
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State of Delaware
Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL HEALTH CARE LP CORP." 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 THIRD DAY OF DECEMBER, A.D. 1999.

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



Edward J. Freel, Secretary of State

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AUTHENTICATION:

0116095

DATE:

12-03-99

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