

FILE NQW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jan 20 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J22798 (9)  
1. Corporation Name  
EDEN PARK VILLAGE INC.

Principal Place of Business 1131 W. LAKE BRANTLEY ROAD ALTAMONTE SPRINGS FL 32714	Mailing Address 1131 W. LAKE BRANTLEY ROAD ALTAMONTE SPRINGS FL 32714
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1131 W LAKE BRANTLEY RD Suite, Apt. #, etc. 22 ALTAMONTE SPRINGS FL. City & State 23 Zip 32714 Country SEMINOLE		2a. Mailing Address 26 SAME Suite, Apt. #, etc. 27 SAME City & State 28 SAME Zip 32714 Country SAME		3. Date Incorporated or Qualified 07/08/1986	
4. FEI Number 59-2687810		Applied For Not Applicable		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent HESSE, ERNEST J., SR. 1131 W. LAKE BRANTLEY RD. ALTAMONTE SPRINGS FL 32714		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Ernest J. Hesse, President 1/06/98  
(NOTE: Registered Agent signature required when reinstating)

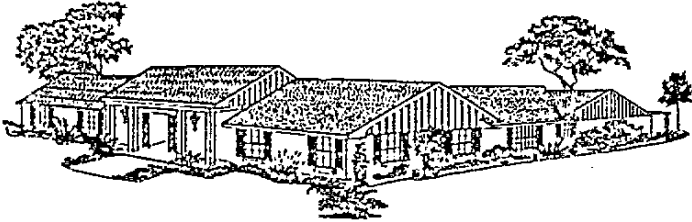
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HESSE, ERNEST J, SR. 1131 W. LAKE BRANTLEY RD ALTAMONTE SPRGS FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC HESSE, ERNEST J S 1131 W. LAKE BRANTLEY RD. ALTAMONTE SPRINGS FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HESSE, ERNEST J S 1131 W. LAKE BRANTLEY RD ALTAMONTE SPRINGS FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ernest J. Hesse, President 1/06/98 407.9625200

CR2E034 (10/97)

# The Family Living Center



Association of Privately-owned  
Seventh-day Adventist Services and Industries

1-106-198

DIVISIONS OF CORPORATIONS

P.O. BOX 1500

TOLLAWASSEE FL. 32302-1500

GENTLEMEN;

I AM ENCLOSING OUR CHECK NO 7443 IN THE AMOUNT OF 158.75. REPRESENTING  
150.00 FILING FEE + 8.75 FOR CERTIFICATE OF STATUS REPORT.

PLEASE RESPOND AS SOON AS POSSIBLE. I NEED THE CERTIFICATION FOR FILING  
MY AGENCY FOR HEALTH CARE ADMINISTRATION INITIAL LICENSE RENEWAL.  
THANKS FOR YOUR IMMEDIATE COOPERATION.

MOST SINCERELY;

*Ernest H. Hester*  
President

SUBJECT: 1998 Annual Report

Filing

Edna Paul Village, DBA  
Family Living Center

A Luxury Adult Congregate Living and Health Care Facility