

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000015552

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: SAGE LIVING CENTER OF PALM BAY I, LLC

Current Principal Place of Business:

2300 BETHELVIEW ROAD, SUITE #110-195
CUMMING, GA 30040

New Principal Place of Business:

6030 BETHELVIEW ROAD
SUITE 102
CUMMING, GA 30040

Current Mailing Address:

2300 BETHELVIEW ROAD, SUITE #110-195
CUMMING, GA 30040

New Mailing Address:

2300 BETHELVIEW ROAD
SUITE 102
CUMMING, GA 30040

FEI Number: 58-2581366

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRENNEIS, JOHN E
227 SOUTH CALHOUN 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

MANAGING MEMBERS/MEMBERS:

Title: MGRM (X) Delete
Name: ADAIR, JOE B
Address: 121 LAUREL CIRCLE
City-St-Zip: RINGGOLD, GA 30736

Title: MGRM (X) Delete
Name: MOORE, EDWARD A
Address: 1701 N GREENVILLE STE #802
City-St-Zip: RICHARDSON, TX 75081

Title: MGRM (X) Delete
Name: NIXON, CHARLES R
Address: 3660 BURNT BRIDGE RD
City-St-Zip: CUMMING, GA 30040

Title: MGRM () Delete
Name: HOWARD, CHARLES S
Address: 10109 BIG CANOE
City-St-Zip: JASPER, GA 30126

ADDITIONS/CHANGES:

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHARLES S HOWARD

MGRM

05/01/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date