

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000001283

FILED
Apr 29, 2003
Secretary of State

Entity Name: SAGE LIVING CENTER OF FORT PIERCE II, LLC

Current Principal Place of Business:

6030 BETHELVIEW ROAD
SUITE 102
CUMMING, GA 30040

New Principal Place of Business:

300 INTERNATIONAL PARKWAY
SUITE 190
HEATHROW, FL 32746 US

Current Mailing Address:

6030 BETHELVIEW ROAD
SUITE 102
CUMMING, GA 30040

New Mailing Address:

300 INTERNATIONAL PARKWAY
SUITE 190
HEATHROW, FL 32746 US

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 () Delete
Name: SAGE LIVING CENTERS, INC SUITE 102
Address: 6030 BETHELVIEW ROAD
City-St-Zip: CUMMING, GA 30040

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SAGE LIVING CENTERS, INC
Address: 300 INTERNATIONAL PARKWAY, SUITE 190
City-St-Zip: HEATHROW, FL 32746 US

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: JAYME S. SICKERT

SD

04/29/2003

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