

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M01000000068

FILED
Apr 17, 2003
Secretary of State

Entity Name: INTEGRATED LIVING COMMUNITITES OF SARASOTA, L.L.C.

Current Principal Place of Business:

HORIZONBAY SENIOR COMMUNITIES
111 E. WACKER DR., STE. 2450
CHICAGO, IL 60601

New Principal Place of Business:

4540 BEE RIDGE ROAD
SARASOTA, FL 34233

Current Mailing Address:

HORIZONBAY SENIOR COMMUNITIES
111 E. WACKER DR., STE. 2450
CHICAGO, IL 60601

New Mailing Address:

C/O HORIZON BAY MANAGEMENT
5102 W LAUREL STREET/STE 700
TAMPA, FL 33607

FEI Number: 59-1835706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: INTEGRATED LIVING CO, MMUNITIES, L.L . C.
Address: 111 E WACKER DR., SUITE 2450
City-St-Zip: CHICAGO, IL 60601

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: INTEGRATED LIVING CO, MMUNITIES, L.L . C.
Address: 5102 W LAUREL STREET/STE 700
City-St-Zip: TAMPA, FL 33607

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: JON DELUCA

CFO

04/17/2003

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