

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR -8 PM 3:47

DOCUMENT # **M72633** (4)
1. Corporation Name
BETHAMY LIVING CENTER MANAGEMENT COMPANY

Principal Place of Business Mailing Address
1970 LANDINGS BLVD. SUITE 200 **1970 LANDINGS BLVD. SUITE 200**
% CENTRAL PARK LODGES INC **% CENTRAL PARK LODGES INC**
SARASOTA FL 34231 **SARASOTA FL 34231**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 2a. Mailing Address
21 **10065 Red Run Blvd.** 26 **10065 Red Run Blvd.**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
Owings Mills, MD **Owings Mills MD**
Zip Country Zip Country
24 **2117** 25 **USA** 29 **2117** 30 **USA**

3. Date Incorporated or Qualified 3a. Date of Last Report
03/18/1988 **05/01/1994**
4. FEI Number Applied For
~~50-2807032~~ **33-0502084** Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
B. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
JOHNSON, WILLIAM A
1970 LANDINGS BLVD, SUITE 200
CENTRAL PARK LODGES INC
SARASOTA FL 34231

10. Name and Address of Now Registered Agent
81 Name **GT Corporation System**
82 Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road
83
84 City **Plantation** FL 85 Zip Code **33324**

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* **ASST. SEC. 2-21-95** DATE

12. OFFICERS AND DIRECTORS
TITLE **PD**
NAME **WARNKE, NORBERT W**
STREET ADDRESS **1970 LANDINGS BLVD**
CITY-ST-ZIP **SARASOTA FL**
TITLE **VID**
NAME **MILLS, GEOFF D.**
STREET ADDRESS **1970 LANDINGS BLVD**
CITY-ST-ZIP **SARASOTA FL**
TITLE **EVD**
NAME **BABBIE, FREDT M.**
STREET ADDRESS **1970 LANDINGS BLVD**
CITY-ST-ZIP **SARASOTA FL**
TITLE **EV**
NAME **EVERTON, JOHN**
STREET ADDRESS **1970 LANDINGS BLVD, #200**
CITY-ST-ZIP **SARASOTA FL**
TITLE **VS**
NAME **JOHNSON, WILLIAM A**
STREET ADDRESS **1970 LANDINGS BLVD, #200**
CITY-ST-ZIP **SARASOTA FL**
TITLE **AS**
NAME **MILLER, MORRIS H**
STREET ADDRESS **1970 LANDINGS BLVD**
CITY-ST-ZIP **SARASOTA FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE **PD** Change Addition
1.2 NAME **Cirka, Lawrence P.**
1.3 STREET ADDRESS **10065 Red Run Blvd**
1.4 CITY-ST-ZIP **Owings Mills MD 21117**
2.1 TITLE **V** Change Addition
2.2 NAME **Cahill, Dennis A**
2.3 STREET ADDRESS **10065 Red Run Blvd**
2.4 CITY-ST-ZIP **Owings Mills, MD 21117**
3.1 TITLE **V** Change Addition
3.2 NAME **Pickett, Taylor**
3.3 STREET ADDRESS **10065 Red Run Blvd**
3.4 CITY-ST-ZIP **Owings Mills, MD 21117**
4.1 TITLE **SO** Change Addition
4.2 NAME **Levin, Marc B.**
4.3 STREET ADDRESS **10065 Red Run Blvd**
4.4 CITY-ST-ZIP **Owings Mills, MD 21117**
5.1 TITLE **VB** Change Addition
5.2 NAME **Elkins, Marshall A.**
5.3 STREET ADDRESS **10065 Red Run Blvd**
5.4 CITY-ST-ZIP **Owings Mills, MD 21117**
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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: *[Signature]* **Taylor Pickett** 2/3/95 (410)998-8745