

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000004180

FILED
Apr 29, 2003
Secretary of State

Entity Name: SENIOR HOUSING SERVICES, INC.

Current Principal Place of Business:

6030 BETHELVIEW ROAD
#102
CUMMING, GA 30040 US

Current Mailing Address:

6030 BETHELVIEW ROAD
#102
CUMMING, GA 30040 US

New Principal Place of Business:

300 INTERNATIONAL PARKWAY
SUITE 190
HEATHROW, FL 32746 US

New Mailing Address:

300 INTERNATIONAL PARKWAY
SUITE 190
HEATHROW, FL 32746 US

FEI Number: 50-2557553

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPARKS, JAMES
2503 CHESTERFIELD DR.
FT. PIERCE, FL 34982 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ADAIR, JOE B
Address: 201 WISELY WAY
City-St-Zip: RINGGOLD, GA 30736

Title: D () Delete
Name: ADAIR, MELANIE
Address: 201 WISELY WAY
City-St-Zip: RINGGOLD, GA 30736

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

Title: D () Delete
Name: UNDERWOOD, JOHN K JR
Address: 2830 LEAF LAND DR
City-St-Zip: DULUTH, GA 30136

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOWARD, CHARLES S
Address: 2893 COWART ROAD
City-St-Zip: DAWSONVILLE, GA 30534 US

Title: D (X) Change () Addition
Name: NIXON, CHARLES R
Address: 84 LAZY WATER DRIVE
City-St-Zip: EUHARLEE, GA 30120 US

Title: D (X) Change () Addition
Name: SICKERT, JAYME S
Address: 950 LANDOVER CROSSING
City-St-Zip: SUWANEE, GA 30024 US

Title: SD (X) Change () Addition
Name: UNDERWOOD, JOHN K JR
Address: 2830 LEAF LAND DR
City-St-Zip: DULUTH, GA 30097 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 or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES S. HOWARD

PD

04/29/2003

Electronic Signature of Signing Officer or Director

Date