

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003113

FILED
Apr 28, 2005
Secretary of State

Entity Name: SOUTH FLORIDA SENIOR RESIDENCES, INC.

Current Principal Place of Business:

1801 CLINT MOORE ROAD
SUITE 200
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

500 LAKE COOK ROAD
SUITE 130
DEERFIELD, IL 60015

New Mailing Address:

FEI Number: 71-0943551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PD () Delete
Name: WEINSTEIN, ROBERT M.D.
Address: 500 LAKE COOK ROAD, STE 130
City-St-Zip: DEERFIELD, IL 60015

Title: VTD (X) Delete
Name: LEVINE, STUART
Address: 500 LAKE COOK ROAD, STE 130
City-St-Zip: DEERFIELD, IL 60015

Title: SD () Delete
Name: ROSENBERG, MELVIN
Address: 500 N MICHIGAN, STE 1700
City-St-Zip: CHICAGO, IL 60611

Title: D (X) Delete
Name: JAFFE, MARTIN
Address: 1926 HARRISON STREET
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TSD (X) Change () Addition
Name: ROSENBERG, MELVIN
Address: 500 N MICHIGAN, STE 1700
City-St-Zip: CHICAGO, IL 60611

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 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: ROBERT WEINSTEIN, M.D.

PD

04/28/2005

Electronic Signature of Signing Officer or Director

_____ Date