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FILED

Apr 22 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N17038 (3)

1. Corporation Name

SENIORS FIRST, INC.

Principal Place of Business

Mailing Address

5395 LB MCLEOD  
ORLANDO FL 328115395 LB MCLEOD  
ORLANDO FL 32811-29523. Date Incorporated or Qualified  
09/29/19863a. Date of Last Report  
10/22/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip Country

28 Zip Country

24 25 29 30

4. FEI Number

59-2759603

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

## 9. Name and Address of Current Registered Agent

## 10. Name and Address of New Registered Agent

CASORIA, EDWARD  
2153 LEE ROAD  
WINTER PARK FL 32789

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

## 12. OFFICERS AND DIRECTORS

## 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD  
NAME WARREN, BILL  
STREET ADDRESS TEAM DISNEY BLDG 4TH FLOOR CUB 458-B  
CITY-ST-ZIP LAKE BUENA VISTA FL

X DELETE

TITLE VD  
NAME WOODSON, DUKE  
STREET ADDRESS 111 N ORANGE AVE STE 1800  
CITY-ST-ZIP ORLANDO FL

X DELETE

TITLE V/D  
NAME JOAN WATTS  
STREET ADDRESS 315 E. ROBINSON ST SUITE 250  
CITY-ST-ZIP ORLANDO FL 32801-1912

X DELETE

TITLE TD  
NAME PALMER, DOUG  
STREET ADDRESS 1201 S ORLANDO AVE STE 400  
CITY-ST-ZIP WINTER PARK FL

X DELETE

TITLE SD  
NAME DEMARK, DIANE  
STREET ADDRESS 261 S LAKE TRIPLET DR  
CITY-ST-ZIP CASSELBERRY FL

X DELETE

TITLE D  
NAME FINNEGAN, ROSEMARY  
STREET ADDRESS 135 CONRAD COURT  
CITY-ST-ZIP WINTER PARK FL

X DELETE

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIPDO PALMER, DOUG  
1201 S. ORLANDO AVE STE 400  
WINTER PARK FL 32789

X Change X Addition

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIPVD WALTER HAWKINS  
CITY HALL, ONE CITY COMMONS  
400 S. ORANGE AVE  
ORLANDO, FL 32801

X Change X Addition

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIPV/D JOHN GAY  
STAFFORD COMMERCIAL  
200 PASADENA PL  
ORLANDO, FL 32803

X Change X Addition

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIPTD FRIE BORISCA  
1ST UNION BANK  
4005 CALE MARY BLVD  
WINTER PARK, FL 32789

X Change X Addition

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIPSD MARGARET SAUER  
908 ALMOND TREE CIRCLE  
ORLANDO, FL 32835

X Change X Addition

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

X Change X Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-97

(407)740-5450

Date

Daytime Phone # 0017215

CR2E037 (9/96)