


FILE NOW: FILING FEE IS \$61.25

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Apr 10 1998 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Worthington</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N35711 (3)**  
 1. Corporation Name  
**SENIOR LIVING CENTERS, INC.**

Principal Place of Business <b>4800 54TH AVENUE S</b> <b>ST. PETERSBURG FL 33711</b> <b>US</b>	Mailing Address <b>P.O. BOX 12560</b> <b>ST. PETERSBURG FL 33733-2560</b> <b>US</b>
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3. Date Incorporated or Qualified  
**10/26/1989**

4. FEI Number <b>59-2961763</b>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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2. Principal Place of Business <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country	2a. Mailing Address <b>25</b> Suite, Apt. #, etc. <b>26</b> City & State <b>27</b> Zip <b>28</b> Country
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?  
☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  
☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ARMACOST, PETER H**  
**4200 54TH AVENUE S**  
**ST. PETERSBURG FL 33711**

81 Name <b>J. WEBSTER HULL</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>4200 - 54TH AVE. S.</b>
83 City <b>ST. PETERSBURG</b>
84 State <b>FL</b>
85 Zip Code <b>33711</b>

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 J. Webster Hull **3/18/98**  
 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 NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>ARMACOST, PETER H</b> <b>6320 BAHAMA SHORES DRIVE S</b> <b>ST. PETERSBURG FL</b>	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>WHITCOMB, STANLEY P</b> <b>1647 SUN CITY CTR PL 204</b> <b>SUN CITY FL</b>	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>PAYTON, ADAMS F</b> <b>2834 PELHAM ROAD N</b> <b>ST PETERSBURG FL</b>	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ARTHUR PETERSON</b> <b>552 JOHN'S PASS AVENUE</b> <b>MADEIRA BEACH FL</b>	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>VICE-CHAIRMAN &amp; DIR.</b> <b>DONALD CRANE</b> <b>260 1ST AVE. S., #102</b> <b>ST. PETERSBURG, FL 33701</b>
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>CHAIRMAN &amp; DIR.</b> <b>J. WEBSTER HULL</b> <b>4200 54TH AVE. S.</b> <b>ST. PETERSBURG FL 33711</b>
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>VICE PRESIDENT / DIR.</b> <b>ARTHUR J. RANSON III</b> <b>201 E. PINE ST., SUITE 425</b> <b>ORLANDO, FL 32801</b>
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>DIRECTOR</b> <b>BETH A. HOUGHTON</b> <b>801 - 6TH ST. S.</b> <b>ST. PETERSBURG FL 33701</b>

14. I 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: J. Webster Hull **3/18/98**

CR2E037 (10/97)