

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Jul 16, 2002 8:00 am
Secretary of State

07-16-2002 90354 020 ****61.25

DOCUMENT # N95000004629

1. Entity Name

C.A.U. CEDARS, INC.

Principal Place of Business

CEDARS OF BAYMEADOWS APARTMENTS
9801 BAYMEADOWS DRIVE
JACKSONVILLE FL
US

Mailing Address

1090 VERMONT AVENUE, N.W.
SUITE 400
WASHINGTON DC 20005
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

52-1949586

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME BRYANT, JAMES S JR.
STREET ADDRESS 600 WHARFSIDE WAY
CITY-ST-ZIP JACKSONVILLE FL 32207

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DPT ☐ Delete
NAME MEHRETEAB, GHEBRE S
STREET ADDRESS 1090 VERMONT AVENUE, N.W., SUITE 400
CITY-ST-ZIP WASHINGTON DC 20005

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DV ☐ Delete
NAME HOFFER, JOHN G III
STREET ADDRESS 1090 VERMONT AVENUE, NW, SUITE 400
CITY-ST-ZIP WASHINGTON DC 20005

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DVS ☐ Delete
NAME WIEDORFER, JOSEPH P JR
STREET ADDRESS 1090 VERMONT AVENUE, N.W., SUITE 400
CITY-ST-ZIP WASHINGTON DC 20005

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME DANFORD, RICHARD D JR
STREET ADDRESS 233 W. DUVAL STREET, 14TH FLOOR
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME FRICK, STEPHEN
STREET ADDRESS 9428 BAYMEADOWS ROAD, SUITE 121
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/25/02

(202) 789-5300

Date

Daytime Phone #

CR2E037 (9/01)