


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90408 010 ****61.25

DOCUMENT # N96000005048	
1. Entity Name SUNBELT LIVING CENTER/APOPKA, INC.	

Principal Place of Business 602 COURTLAND STREET STE 200 ORLANDO, FL 32804	Mailing Address 602 COURTLAND STREET STE 200 ORLANDO, FL 32804
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



04262004 Chg-NP CR2E037 (10/03)

4. FEI Number 59-3437867	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent TRIMBLE, T.L. 111 N. ORLANDO AVE. WINTER PARK, FL 32789-3675		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2004**

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CAMP, VANN D 602 COURTLAND ST STE 200 ORLANDO, FL 32804 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/VP/D ROBERT R. HENDERSCHIEDT 111 N. ORLANDO AVE WINTER PARK, FL 32879 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LIWAG, MELCHOR R 602 COURTLAND ST STE 200 ORLANDO, FL 32804 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MICHELLE FETTERS 602 COURTLAND ST, SUITE 200 ORLANDO, FL 32804 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHAW, TERRY D 111 N ORLANDO AVE WINTER PARK, FL 32789 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CENTER, RICHARD 3978 MEMORIAL DR DECATUR, GA 30032 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BLOCK, MARK L 111 N ORLANDO AVE WINTER PARK, FL 32789 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GARY C. SKILTON 111 N. ORLANDO AVE WINTER PARK, FL 32789 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WERNER, THOMAS L 111 N ORLANDO AVE WINTER PARK, FL 32789 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: Michelle Fetters **Michelle Fetters** 4/28/04 407-975-3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment
ADVENTIST HEALTH SYSTEM / SUNBELT, INC.
SUNBELT HEALTH CARE CENTERS, INC.
ADVENTIST HEALTH SYSTEM/TEXAS, INC.
MID-SOUTH NURSING HOMES, INC.
SUNBELT LEASING & MANAGEMENT SERVICES, INC.
ROLLINS BEDFORD CORPORATION
SHCC SERVICES, INC.
SUNBELT LIVING CENTERS, INC.
SHAWNEE MISSION HEALTH CARE, INC.

#N9600005048

Year: 2004

*Officers & Board Members

1. ***Robert R. Henderschedt, Sr. VP 1998-present**
Adventist Health System
111 North Orlando Avenue
Winter Park, FL 32789

(407) 975-1419
 2. **Michelle Fetters, President June 2003- present**
Adventist Care Centers
602 Courtland Street, Suite 200
Orlando, FL 32804

(407) 975-3005
 3. *** Richard P. Center, Treasurer 1995-present**
Southern Union Conference of SDA
3978 Memorial Drive
Decatur, GA 30032

(404) 299-1832
 4. **Gary C. Skilton, Treasurer 1997-present**
Adventist Health System
111 North Orlando Avenue
Winter Park, FL 32789

(407) 975-1460
 5. **J. Deryl Knutson, Treasurer 1997-present**
Southwestern Union Conf. of SDA
777 South Burleson Blvd.
Burleson, TX 76028

(817) 295-0476
 6. **Richard K. Reiner, Sr. Vice President 1995-present**
Florida Hospital
2400 Bedford Road
Orlando, FL 32803

(407) 303-7658
 7. **Sandra K. Johnson, Vice President 1998-present**
Adventist Health System
111 North Orlando Avenue
Winter Park, FL 32789

(407) 975-1402
 8. **Peter M. Weber, President 1998-present**
Huguley Memorial Medical Center
11801 S. Freeway
P.O. Box 6337
Fort Worth, TX 76115-0337

(817) 293-9110
 9. **Thomas L. Werner, President 2000 - present**
Adventist Health System
111 North Orlando Avenue
Winter Park, FL 32789

(407) 975-1418
 10. **Terry D. Shaw, Treasurer 2000- present**
Adventist Health System
111 North Orlando Avenue
Winter Park, FL 32789

(407) 975-1405
 11. **G. Thomas Evans, CPA, Treasurer Feb 2003-present**
Mid-America Union Conference of SDA
8307 Pine Lake Road
Lincoln, NE 68516

(402) 484-3006
 12. **Paul C. Rathbun, Sr. Vice President Jan 2004-present**
Adventist Health System
111 North Orlando Avenue
Winter Park, FL 32789

(407) 975-1473
- * Robert R. Henderschedt – Chairman of the Board
** Richard P. Center – Secretary-Treasurer