2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000117615

Entity Name: NORTH BROWARD ASSISTED LIVING, INC.

FILED Jan 13, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1413 SUNSET HARBOUR DRIVE, #119 1413 SUNSET HARBOUR DRI., #119

MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

1413 SUNSET HARBOUR DRIVE, #119 1413 SUNSET HARBOUR DR., #119

MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POSNER, MATTHEW A POSNER, MATTHEW A

1413 SUŃSET HARBOUR DRIVE, #119 1413 SUŃSET HARBOUR DR., #119

MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

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: 01/13/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 SAHM, ROLAND D
 Name:
 SAHM, ROLAND D

 Address:
 6175 WINDIG LAKE DRIE
 Address:
 6175 WINDING LAKE DR.

Address: 6175 WINDIG LAKE DRIE Address: 6175 WINDING LAKE DR City-St-Zip: JUPITER, FL 33458 City-St-Zip: JUPITER, FL 33458

Name: POSNER, MATTHEW A Name: POSNER, MATTHEW A

Address: 1413 SUNSET HARBOUR DRIVE, #119 Address: 1413 SUNSET HARBOUR DR., #119 City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATTHEW A. POSNER D 01/13/2002