

2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000031690

FILED
Aug 09, 2012
Secretary of State

Entity Name: SENIORBRIDGE FAMILY COMPANIES (FL), INC.

Current Principal Place of Business:

580 VILLAGE BLVD.
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

845 THIRD AVENUE
7TH FLOOR
NEW YORK, NY 10022

New Mailing Address:

500 W. MAIN STREET
21ST FLOOR, LEGAL DEPARTMENT
LOUISVILLE, KY 40202

FEI Number: 65-1096853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: MCCALLISTER, MICHAEL B
Address: 500 W.MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

Title: D
Name: MURRAY, JAMES E
Address: 500 W. MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

Title: D
Name: BLOEM, JAMES H
Address: 500 W. MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

Title: TREA
Name: BLOEM, JAMES H
Address: 500 W. MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

Title: PRES
Name: BROUSSARD, BRUCE D
Address: 500 W. MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

Title: SEC
Name: LENAHA, JOAN O
Address: 500 W. MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

I hereby 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 all other like empowered.

SIGNATURE: JOAN O. LENAHA

SEC

08/09/2012

Electronic Signature of Signing Officer or Director

Date