2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 02, 2003 8:00 am
Secretary of State
04-28-2003 91393 010 ***150.00

DOCUMENT # P01000113293

1. Entity Name
SENIOR LIVING OF TEMPLE, INC.

Principal Place of Business	Mailing Address
950 SE 12TH STREET HIALEAH FL 33010	950 SE 12TH STREET HIALEAH FL 33010

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
111 NE 1st Street	111 NE 1st Street
Suite, Apt. #, etc. Suite 820	Suite, Apt. #, etc. Suite 820
City & State Miami, Florida	City & State Miami, Florida
Zip 33132 Country USA	Zip 33132 Country USA

4. FEI Number 65-1157207 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GRUTTER JOSEPHER & RUFFIN PA
100 W CYPRESS CREEK RD SUITE 900
FT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name: Tescher Gutter Chaves Josepher Rubin, P.A.
Street Address (P.O. Box Number is Not Acceptable): 2101 Corporate Blvd.
Suite 107
City: Boca Raton FL FL Zip Code: 33431

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: Thomas Lottin VP Vice President of Tescher Gutter Chaves Josepher Rubin PA 5/28/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstated) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP ANSLEY, NANCY 950 SE 12TH STREET HIALEAH FL 33010	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 111 NE 1st Street, Suite 820 Miami, Florida 33132
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS BATCHELOR-COBJOHPS , ANNE 950 SE 12 ST HIALEAH FL 33010	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 111 NE 1st Street, Suite 820 Miami, Florida 33132
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T VELASCO, CARIDAD 950 SE 12 ST HIALEAH FL 33010	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 111 NE 1st Street, Suite 820 Miami, Florida 33132
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CR2E034 (10/02)

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 607, 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: Nancy Ansley President 4/18/03 305-416-9066
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #