

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 15 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P22225 (7)  
1. Corporation Name  
LTC OF WASHINGTON, INC.



Principal Place of Business 601 UNION ST. 22ND FLOOR SEATTLE WA 98101 US	Mailing Address 601 UNION ST. 22 ND FLOOR SEATTLE WA 98101 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 12/22/1988	4. FEI Number 91-1295015 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

DARDEN, JACQUELINE  
4010 BOY SCOUT BLVD  
STE 200  
TAMPA FL 33607

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input checked="" type="checkbox"/> DELETE	1.1 TITLE	P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TRUEDELL, CAMERON	1.2 NAME	THOMAS A. SKIFF
STREET ADDRESS	8510-308TH AVENUE S.E.	1.3 STREET ADDRESS	1650 LOS GARCOS DRIVE
CITY-ST-ZIP	PRESTON WA	1.4 CITY-ST-ZIP	SAN RAPHAEL, CA 94903
TITLE	PD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LARSON, DALE	2.2 NAME	D. CRAIG SMITH
STREET ADDRESS	17020 159TH AVE NE	2.3 STREET ADDRESS	601 UNION STREET, 22nd FLOOR
CITY-ST-ZIP	WOODINVILLE WA	2.4 CITY-ST-ZIP	SEATTLE, WA 98101
TITLE	ST <input type="checkbox"/> DELETE	3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CROMWELL, KRIS	3.2 NAME	STEPHEN P. JOYCE
STREET ADDRESS	2832 NW 61ST	3.3 STREET ADDRESS	777 LONG RIDGE ROAD, BLDG. B
CITY-ST-ZIP	SEATTLE WA 98107	3.4 CITY-ST-ZIP	STAMFORD, CT 06927
TITLE	VP <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEHN, KENNETH	4.2 NAME	
STREET ADDRESS	15026-70TH AVE NE	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOTHELL WA	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)