2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34537

Entity Name: VENTAS, INC.

FILED Apr 10, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10350 ORMSBY PARK PLACE, SUITE 300 LOUISVILLE, KY 40223 **Current Mailing Address: New Mailing Address:** 10350 ORMSBY PARK PLACE, SUITE 300 LOUISVILLE, KY 40223 FEI Number: 61-1055020 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition ROSENBERG, SHELI Z Name: Name: 2 NORTH RIVERSIDE PLAZA STE 600 Address: Address: CHICAGO, IL 60606 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition Name: CROCKER, DOUGLAS II Name: 2 NORTH RIVERSIDE PLAZA Address: Address: City-St-Zip: CHICAGO, IL 60606 City-St-Zip: Title: () Delete Title: PD () Change () Addition CAFARO, DEBRA A Name: Name: 10350 ORMSBY PARK PLACE, SUITE 300 Address: Address: LOUISVILLE, KY 40223 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition RINEY, RICHARD T Name: Name: Address: 10350 ORMSBY PARK PLACE, SUITE 300 Address: City-St-Zip: LOUISVILLE, KY 40223 City-St-Zip: Title: Title: () Delete () Change () Addition GEARY, RONALD G Name: Name: 10140 LINN STATION ROAD Address: Address: City-St-Zip: LOUISVILLE, KY 40223 City-St-Zip: Title: () Delete Title: () Change () Addition WOOD, BRIAN K Name: Name: 10350 ORMSBY PARK PLACE, SUITE 300 Address: Address: City-St-Zip: City-St-Zip: LOUISVILLE,, KY 40223

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BRIAN K. WOOD SRVP 04/10/2007