2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 06, 2002 8:00 am Secretary of State DOCUMENT # P35878 1. Entity Name 05-06-2002 90230 001 ***150.00 NATIONAL HEALTH INVESTORS, INC. Principal Place of Business Mailing Address CITY CENTER CITY CENTER 100 VINE STREET. SUITE 1400 100 VINE STREET, SUITE 1400 MURFREESBORO TN 37130 MURFREESBORO TN 37130 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 62-1470956 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 City Zip Code 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. SİGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition NAME ADAMS, W. ANDREW NAME STREET ADDRESS 100 VINE STREET, #1400 STREET ADDRESS CITY-ST-ZIP MURFREESBORO TN CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME LAROCHE, RICHARD F., JR. NAME STREET ADDRESS 100 VINE STREET, #1400 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MURFREESBORO TN TITLE ☐ Delete TITLE ☐ Change . ☐ Addition NAME NAME SWAFFORD, CHARLOTTE A. STREET ADDRESS STREET ADDRESS 100 VINE STREET, #1400 CITY-ST-ZIP CITY-ST-ZIP MURFREESBORO TN TITLE Delete Director D TITLE Change Addition Robert A. McCabe, Jr. NAME TYRRELL, JACK NAME STREET ADDRESS 211 Commerce Street 3100 WEST END AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NASHVILLE TN Nashville, TN 37201 TITLE D ☐ Delete TITLE Change ☐ Addition NAME WEBB, ROBERT T. NAME STREET ADDRESS 149 MTCS DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MURFREESBORO TN

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

WELCH, TED H.

NASHVILLE TN

THE TOWER, #2920

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Andrew Adams 4/19/02 6/5-890-9/08
Daytime Phone #

☐ Change

☐ Addition