FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT # 1. Corporation Name

P94000014329 (4)

SENIOR HOLDING CORP.

SIGNATURE:

Driversal Disco	of Discharge	NACTOR AND AND			· - · · · · · · · · · · · · · · · · · · ·	_					
Principal Place of Business Mailing Address 1177 S.E. THIRD AVE. 1177 S.E. THIRD AVE.											
FT. LAUDERDA		FT. LAUDERDALE FL 3	3316								
						3.	Date Incorporated or Qualified 02/18/1994	3a. Date 01	of Las /26/ 1		
2. Principal Pta	ce of Business	2a. Mailing Address				4.	FEI Number			Applied For	
21 Suite, Apt. #		Suite, Apt. #, etc.	_ · _ · _ · _ · _ · _ · _ · · _ · · · ·				65-0470668			Not Applicable	e
22] City & State		27	the name of the contract of th				Certificate of Status Desired	\$8.75 Additional Fee Required			
23		28				0.	Election Campaign Financing Trust Fund Contribution			.00 May Be Ided to Fees	
Ζιρ	Country	Zip	Cour	ntry		8.	This corporation has liability for in	ntangible ta			_
24	25	29	30		Florida Statutes Yes No						
	9. Name and Address of Curre	nt Registered Agent				10.	Name and Address of New R	egistered A	gent		
				81	Name						
	, JOHN W		ŀ	82	Street Add	dress (P.	O. Box Number is Not Acceptable	e)			
	. THIRD AVE.		-	83							
FI. LAUL	ERDALE FL 33316			03							
				84	City			FL	85	Zip Code	
11. Pursuant to	the provisions of Sections 607,050	2 and 607.1508. Florida Statute	es, the abov	/e-n	amed coroo	oration s	ubmits this statement for the num	ado to opo	Noissa i	te registered offic	
or registere	d agent, or both, in the State of Flor i, and accept the obligations of, Sec	ida. Such change was authorize	ed by the co	orpc	oration's boa	ard of di	rectors. I hereby accept the appo	intment as	egiste	red agent. I am	,0
SIGNATURE	i, and assept the ornganoria or, sec	tion our today, i longer statutes.	•								
	illy arms. Typing or printed harms of registerest agric	taistitik ifappicacie (NO	11. Registered /	Agent	t signature require	red when re	instating)	DATE			
12.	OFFICERS AND DIRECTORS		13.				ADDITIONS/CHANGES TO OFFI	CERS AND	DIREC	TORS IN 12	
יווני	P	☐ DEFELE	1 1 TITLE] Chan	ge 🔲 Addition	
NAM:	BARKER, ART		1.2 NAME								
STHEFT ADDRESS	1313 S. ANDREWS AVE.		13 STREET ADDRESS								
CUD ST ZIP TILLE	FT. LAUDERDALE FL DV T DELETE		14 CHY-ST-ZIP 2 1 TITLE						Chan	no D Addition	_
NAME:	NOVAK, KENNETH E		2 2 NAI					L.) Chan	ge Addition	
STREET ADDRESS	6555 POWERLINE RD, SUITI	308		STREET ADDRESS							
CITY ST ZIF	FT LAUDERDALE FL		2401								
TULE	DS DELETE		3 1 TITLE					С] Chan	ge Addition	
NAMI	PHILLIP, SHANNON W		3 2 NA	ME							
STREET ADDRESS	6555 POWERLINE RD, SUITI	308	33 \$1	REET	ADDRESS						
CHY-S1-7(P	FT LAUDERDALE FL	F) profit	3 4 CIT		1 - ZIP						_
Tille	DT COOTT A	☐ DELETE	4 1 TH					L] Chan	ge 🔲 Addition	
NAM:	BARRETT, SCOTT A	- 200	4.2 NA								
STEEL ADDRESS CITY - ST- ZIP	6555 POWERLINE RD, SUITI FT LAUDERDALE FL	300			ADDRESS						
HILE	TT DAODENDALL TE	☐ DELFIE	4 4 C/T 5 1 T/T		1 - 71r'				Chan	ge 🗍 Addition	-
NAME		_	5.2 NA					•			
STREET ADDRESS					ADDRESS						
CHY S1-ZIF			5 4 C IF								
TH.F		☐ DELETE	6 1 111	ILE				C] Chan	ge 🔲 Addition	
NAM!			6.2 NAI	ME							
STREET ADDRESS			6 3 STF	REET	ADDRESS						
CITY-ST-7#	partiful that the information are ded	with this filing is yet wholl 4	6 4 CIT			for the	womation states in Continue 220	37(0)(1) 5:	4. 6		
certify that is oath; that I appears in	certify that the information supplied the information indicated on this and arn an officer of thector of the corp Block 12 or Bit 13 in changert or	with this liling is voluntarily furth ual report or supplemental annu oration or the receiver or trustee on an attachment with an addre	ished and c ual report is e empowere ess.	ices trui ed ti	s not quality to e and accura to execute this	ior the e rate and his repor	exemption stated in Section 119.0 that my signature shall have the tas required by Chapter 607, Flo	ur (3)(K), Flor same legal e rida Statute	ida Sta iffect a s; and	atutes, i further is if made under that my name	

E OF SIGNING OFFICER OR DIRECTOR

305-451-4477