## **32001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

	ACNIT II				4 *	,	( <b>V</b> )	
DOCUMENT # P96000102635  1. Entity Name  COLONIAL RETIREMENT VILLAGE, INC.				FILED 01 JUN 25 PM 3: 16				
								Principal Place of Business 450 59th St. W. #200 1450 59th
radent	on, F1 34209	Bradenton, F	1 34209		 	_	•	
2. Prîncipal P	lace of Business	3. Mailing Address	<del> </del>	_	•			
	·	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
			1				liad For	
City & State		City & State		4. FEI Number 65-0727914		Not a	Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desire		3.75 Additi Required	ional	
	6. Name and Address of Current	Registered Agent		7. Name and Address of Ne	w Registered Age	nt		
VEN.	ABLE, JOSEPH P.		. Name	. Name				
1400 4th Avenue West Bradenton, Fl 34205			Street Address (P.O. Box Number is Not Acceptable)					
			City		FL	Zip Code		
Tax filing r (See criter	oration is eligible to satisfy its Intangible equirement and elects to do so.	After MAY 1, 200 Make Check Payabl	e to Department of S	itate .	oution.	Added t		
11.	OFFICERS AND		12.	ADDITIONS/CHANGES TO			Addition 8	
TITLE NAME STREET ADDRESS	PD BELLINO, ROBERT 1450 59th St. W.	J. Suite 100	TITLE NAME STREET ADDRESS	3000Č	)44620	)33-	1.	
CITY-ST-ZIP	Bradenton, Fl 34		CITY-ST-ZIP	-U1: **	/06/0101 <del>**372.50</del>	<del>*************************************</del>	Adolion (	
NAME STREET ADDRESS	SD JACKSON, SHEILA 1450 59th St. W.		NAME STREET ADDRESS			, a.ag.		
CITY-ST-ZIP	Bradenton, F1 34	209	CITY-ST-ZIP		<u>.</u>	T Change	Addition	
NAME STREET ADDRESS	T   Venable,Joseph E   1400 4th Ave.W.		NAME STREET ADDRESS CITY-ST-ZIP			] Change ∙	Addition	
CITY-ST-ZIP	Bradenton, F1 34	205	TITLE			Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP		P	18 1		
TITLE NAME		☐ Delete	TITLE NAME		, C	Change	Addition	
STREET ADDRESS CITY-ST-ZIP		<i>.</i>	STREET ADDRESS CITY-ST-ZIP		• • •			
TITLE NAME		☐ Delete	TITLE , NAME CTREET ADDRESS	#.AF		Change	Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		1		<u> </u>	
13. Thereby of indicated of the corchanged.	certify that the information supplied wit fon this report or supplemental report rporation or the receiver or trustee emp , or on an attachment with an address	th this filing does not qualify for is true and accurate and that in powered to execute this report in with all other like empowered	the exemption stated in y signature shall have t as required by Chapter (	Section 119.07(3)(i), Florida Statu he same legal effect as if made un 607, Florida Statutes; and that my	tes. I further certify der oath; that I am name appears in Bl	that the inf an officer o lock 11 or f	ormation or director Block 12 if	

(941) 794-6752

6/20/01

## LIFECARE MANAGEMENT, INC.



June 20, 2001

Division of Corporations P.O. Box 1500 Tallahassee, F1 32302-1500

To Whom it May Concern:

Please be advised that we did not receive the 2001 UBR forms for the corporations listed below. Please waive the late fees when these reports are filed by our representatives from Capital Connection.

Colonial Retirement Village, Inc.

Lake Placid Retirement Villas, Inc.

Colony Assisted Living, L.C.

Thank you for your co-operation.

Roy D. Jackson President