

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000005262

FILED
Apr 06, 2005
Secretary of State

Entity Name: HALLMARK SENIOR HOUSING, INC.

Current Principal Place of Business:

212 S. CENTRAL
SUITE 301
ST. LOUIS, MO 63105

New Principal Place of Business:

Current Mailing Address:

212 S. CENTRAL
SUITE 301
ST. LOUIS, MO 63105

New Mailing Address:

FEI Number: 36-4213278 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNEY, THERESA M ESQ
10110 SAN JOSE BLVD.
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: KIRKLAND, DAVID L
Address: 212 S. CENTRAL, SUITE 301
City-St-Zip: ST LOUIS, MO 63105

Title: VP () Delete
Name: KENKEL, JOSEPH
Address: 212 S. CENTRAL, SUITE 301
City-St-Zip: ST LOUIS, MO 63105

Title: SD () Delete
Name: LOVE, ANDREW S
Address: 212 S. CENTRAL, SUITE 200
City-St-Zip: ST LOUIS, MO 63105

Title: D () Delete
Name: SCHIFFER, LAURENCE A
Address: 212 S. CENTRAL, SUITE 200
City-St-Zip: ST LOUIS, MO 63105

Title: T () Delete
Name: CLEMENT, GLORIA D
Address: 212 S. CENTRAL, SUITE 100
City-St-Zip: ST LOUIS, MO 63105

Title: VP () Delete
Name: HEINZ, GEORGENE R
Address: 212 S CENTRAL STE 301
City-St-Zip: SAINT LOUIS, MO 63105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHIFFER, DOUGLAS S
Address: 4885 OLDE TOWNE PARKWAY, SUITE 103
City-St-Zip: MARIETTA, GA 30068

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: KIRKLAND, DAVID L
Address: 212 S. CENTRAL, SUITE 301
City-St-Zip: ST LOUIS, MO 63105

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GEORGENE R. HEINZ

VP

04/06/2005

Electronic Signature of Signing Officer or Director

_____ Date