

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.**  
 AMOUNT DUE ON OR BEFORE 09/15/99: \$330 (IF DISSOLVED), MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0071427

<b>PROFIT CORPORATION ANNUAL REPORT</b> <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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FILED  
 99 JUL 22 PM 3:02

**DOCUMENT # P98000042037**  
 1. Corporation Name  
**STOCKTON ALF, INC.**

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



Principal Place of Business 1675 PALM BEACH LAKES BLVD. WEST PALM BEACH FL 33401	Mailing Address 1675 PALM BEACH LAKES BLVD. WEST PALM BEACH FL 33401
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/08/1998	
21	22	26	27	4. FEI Number 65-0838380	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
23	24	28	29	30	8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input type="checkbox"/> No
Zip		Country		Zip	
Country		Country		Country	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>ERBEY, JOHN R</b> <b>1675 PALM BEACH LAKES BLVD.</b> <b>WEST PALM BEACH FL 33401</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83	500002940525-0 -07/23/99--01091--008		
				84	City *****17 50 FL 84 *****17 50		

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ERBEY, WILLIAM C	1.2 NAME	500002940525-0
STREET ADDRESS	1675 PALM BEACH LAKES BLVD. #1002	1.3 STREET ADDRESS	-07/23/99--01091--008
CITY-ST-ZIP	WEST PALM BEACH FL 33401	1.4 CITY-ST-ZIP	*****550.00 *****550.00
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	P CHRISTINE A. REICH
STREET ADDRESS		2.3 STREET ADDRESS	1675 PALM BEACH LAKES BLVD.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	JOHN R. BARNES
STREET ADDRESS		3.3 STREET ADDRESS	1675 PALM BEACH LAKES BLVD.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	TRINI L. DONATO
STREET ADDRESS		4.3 STREET ADDRESS	1675 PALM BEACH LAKES BLVD.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	VT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	RICHARD DELGADO
STREET ADDRESS		5.3 STREET ADDRESS	1675 PALM BEACH LAKES BLVD.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	AS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	TIMOTHY J. REYNOLDS
STREET ADDRESS		6.3 STREET ADDRESS	1675 PALM BEACH LAKES BLVD.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33401

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *John R. Barnes* JOHN R. BARNES, SR. VP 7/20/99 561-682-8600

CR2E034 (5/99)

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STOCKTON ALF, INC.

“EXHIBIT A”

William C. Erbey	Chairman of the Board and Chief Executive Officer
Christine A. Reich	President
John R. Erbey	Senior Managing Director and Secretary
John R. Barnes	Senior Vice President
Trini L. Donato	Senior Vice President and Assistant Secretary
Thomas K. McCarthy	Senior Vice President
Mark S. Zeidman	Senior Vice President and Chief Financial Officer
Richard Delgado	Vice President and Treasurer
Stephen R. Krallman	Vice President
Andrea M. Mattei	Vice President
Timothy J. Reynolds	Assistant Secretary