P98000093645

| aegis | |
|--|----------------|
| 1661 Old Henderson Road Columbus, Ohio 43220 (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | - , |
| Special Instructions to Filing Officer: | |
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03/24/03--01023--015 **35.00





FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 1, 2003

AEGIS 1661 OLD HENDERSON ROAD COLUMBUS, OH 43220

SUBJECT: SUMMER HOUSE ASSISTED LIVING, INC.

Ref. Number: P98000093645

We have received your document for SUMMER HOUSE ASSISTED LIVING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Document Specialist

Letter Number: 903A00019634

PLEASE CALL ME AT (614) 459-0445,

OCEASE CALL ME AT (614) 459-0445,

OF THERE ARE ANY QUESTIONS

Algoris

Level old Henderson Road

Columbus, OH 43220

Division of Corporations - P.O. BOX 6327-Tallahassee, Florida 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORIDA |
|--|
| submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. |
| 1. The name of the corporation: SUMMER HOUSE ASSISTED LIVING, /NC. |
| 2. The mailing address of the corporation: 1661 OCD HENDERSON ROAD, COCUMBUS, OHIO 43220 |
| 3. Date of incorporation/qualification: NOVEMBER 4,1998 Document number: P9800093695 |
| 4. The name and address of the current registered agent and registered office: |
| KONN LITEORES, ESO, KEVING, COLEMAN, ESO |
| 4001 TAMIAMI TRAIL NORTH, SUITE 300 |
| NAPLES, FL 34103 |
| 5. The name and address of the new registered agent (if changed) and /or registered office (i g (P.O. Box NOT Acceptable) |
| JAMES H. SIESKY |
| SIESKY PILON AND WOOD |
| 1000 NORTH TAMIAMITRAIL, STE ZOI, NAPLES, FL 34102 |
| The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical. |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board. |
| 8 25 2003 |
| (Signature of an officer, chairman of the board) (Date) |
| K. ROBERT EVENSON, JR., TREASURER. (Printed or typed name and title) |
| Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. |
| Jens V. Siesky 3/3/03 |
| (Signature of Registered Agent) (Date) A Control of Agent of Age |
| If signing on behalf of an entity: James H. Siesky |
| (Typed or Printed Name) (Capacity) |
| * * * FILING FEE: \$35.00 * * * |
| CR2E045(9/00) Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |