

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # S10504

(6)

1. Corporation Name

THE ATRIUM NURSING HOME, INC.

Principal Place of Business

* JACK C. DEMETREE
3740 BEACH BLVD., SUITE 300
JACKSONVILLE FL 32207

Mailing Address

* JACK C. DEMETREE
3740 BEACH BLVD., SUITE 300
JACKSONVILLE FL 32207-3883

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

3. Name and Address of Current Registered Agent

DEMETREE, JACK C.
3740 BEACH BLVD.
SUITE 300
JACKSONVILLE FL 32207

11. Pursuant to the provisions of Sections 607.0132 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office of registration, agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I, the undersigned, hereby accept the appointment as registered agent. I am familiar with and accept the filing of this statement. Section 607.0105, Florida Statutes.

SIGNATURE

12.

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
DPT	DEMETREE, JACK C.	3740 BEACH BLVD #300	JACKSONVILLE FL
DV	DEMETREE, WILLIAM C.	3348 EDGEWATER DR	ORLANDO FL
VSS	SCHRAMM, FRED C.	3740 BEACH BLVD #300	JACKSONVILLE FL
DV	BROGDEN, CHRIS	6000 LAKE FOREST DR STE 200	ATLANTA GA

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
President / Director	Chris Brogden	6000 Lake Forrest Dr. #200	Atlanta GA 30328
Director	William Demetree	3348 Edgewater Dr.	Orlando FL
Secretary	Phil Rees	6000 Lake Forrest Dr. #200	Atlanta GA 30328
Vice President / Director	Edward E. Lane	6000 Lake Forrest Dr. #200	Atlanta GA 30328

BS 6/12

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of, changed, or on an attachment with an address.

SIGNATURE

Edward E. Lane

4/20/98 444-755-7500

FILED

98 JUN 12 AM 1:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



900002560809--3

06/16/98-01061-022

3. Date incorporated or qualified 11/02/1990 Date of last report 03/26/1998

4. FFI Number 59-3050853 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

10. Name and Address of New Registered Agent

81 Name C.T. Corporation Systems
82 Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Rd
83
84 City Plantation FL 85 Zip Code 33324

JENNIFER PAULTMAN
ASSISTANT SECRETARY

6-10-98

CR2E034 (9/96)