FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **APPROVED** PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS 1996 JUN -4 PM 2: 26 DOCUMENT # V44579 (3)SECRETARY OF STATE TALLAHASSEE, FLORIDA BAILEY RETIREMENT CENTER, INC. Principal Place of Business Mailing Address 1121 NW 6TH STREET 1121 NW 6TH STREET GAINESVILLE FL 32601 GAINESVILLE FL 32601 3. Date Incorporated or Qualified 3a. Date of Last Report 06/18/1992 12/28/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 /121 N.W. 6th Skeet 21 /121 N.W. 6t Street 59-3128910 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Gainesville 23 Jamesville Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s 199.032, USA USA 25 29 32601 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name **CT CORPORATION SYSTEM** Street Address (P.O. Box Number is Not Acceptable) 1200 S PINE ISLAND RD **PLANTATION FL 33324** 83 84 City 85 Zip Code 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 accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. CR2E034 (12/95) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1 1 TITLE Change Addition 00/04/36-1 00/04/36-1 48/03/35.36 NAME DOYLE. MICHAEL J. 1.2 NAME SIX NEW ENGLAND EXECUTIVE PARK STREET ADDRESS 1.3 STREET ADDRESS **BURLINGTON MA 01803** CITY-ST-ZIP - Hamail (1984) 1.4 CITY-ST-ZIP TITLE DELETE. 2 1 TITLE Change Addition NAME HOLLISTER, CHRISTOPHER W. 2.2 NAME STREET ADDRESS SIX NEW ENGLAND EXECUTIVE PARK 2.3 STREET ADDRESS **BURLINGTON MA 01803** CITY-ST-ZIP 2 4 CITY - ST- ZIP TITLE [] DELETE TS 3 1 TITLE Addition NAME MILES, KENNETH M. 3.2 NAME 计连套计划 李冠。 STREET ADDRESS SIX NEW ENGLAND EXECUTIVE PARK 3.3 STREET ADDRESS **BURLINGTON MA 01803** CITY-ST-ZIP 34 CHTY-ST-ZIP TITLE DELETE 4. 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CHY - ST - ZIP TITLE ☐ DELETE 5 1 TIFLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 6 1 TITLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CHTY-ST-ZIP 6.4 CiTY - ST - 7IP 14. I do hereby certify that the information of certify that the information indicates on the oath; that I am an officer or director of the appears in Block 12 or Block 1/2 if chapter I and does not qualify for the exemption stated in Section 119.07(3)(k), Fiorida Statutes. I further the form of accurate and that my signature shall have the same legal effect as if made under inpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

President

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OF

6/3/96 (6/7)270-4500