

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000031690

Entity Name: SENIORBRIDGE FAMILY COMPANIES (FL), INC.**Current Principal Place of Business:**845 THIRD AVENUE
7TH FLOOR
NEW YORK, NY 10022**Current Mailing Address:**500 W. MAIN STREET
21ST FLOOR, LEGAL DEPARTMENT
LOUISVILLE, KY 40202**FEI Number:** 65-1096853**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 US*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

Officer/Director Detail :

Title DIRECTOR
Name MURRAY, JAMES E
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR
Name BEVERIDGE, ROY A M.D.
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR
Name BROUSSARD, BRUCE D
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT, CORPORATE SECRETARY
Name LENAHA, JOAN O
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title PRESIDENT
Name RACKOW, ERIC C M.D.
Address 845 THIRD AVENUE
7TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title VICE PRESIDENT - FINANCE
Name ALLEN, MICHAEL D
Address 845 THIRD AVENUE
7TH FLOOR
City-State-Zip: NEW YORK NY 10022

Title VICE PRESIDENT - TAX
Name ROBINSON, DONALD H
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT
Name LAMBERT, CHARLES F III
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

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I hereby 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 all other like empowered.

SIGNATURE: DONALD H ROBINSON**AUTH SIGNER****02/24/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SENIOR VICE PRESIDENT, CHIEF FINANCIAL
OFFICER
Name KANE, BRIAN A
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title ASSISTANT CORPORATE SECRETARY
Name VENTURA, JOSEPH C
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT, TREASURER
Name BAILEY, ALAN J
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title VICE PRESIDENT
Name WILSON, RALPH M
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title DIRECTOR
Name CONNOLLY, MARSDEN M
Address 500 W. MAIN STREET
City-State-Zip: LOUISVILLE KY 40202

Title VP
Name PRESTON, WILLIAM M
Address 500 WEST MAIN STREET
City-State-Zip: LOUISVILLE KY 40202