

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAY 26 AM 9:53

DOCUMENT # **F94000004086 (4)**

1. Corporation Name  
**BRADENTON RETIREMENT, INC.**

Principal Place of Business      Mailing Address  
**7001 CENTER STREET      7001 CENTER STREET**  
**MENTOR OH 44060      MENTOR OH 44060**

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified      3a. Date of Last Report  
**08/08/1994**      ~~08/08/1994~~

2. Principal Place of Business      2a. Mailing Address

21. Suite, Apt #, etc.      26. Suite, Apt #, etc.

22. City & State      27. City & State

23. Zip      28. Zip      Country

24.      25.      29.      30.      Country

4. FEI Number      Applied For  
**34-1774394**      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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City      FL      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 familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Thomas J. Smith*      V.P.      5/19/95  
Signature (Typed or printed name of registered agent and title if applicable)      Registered Agent (Signature required when registering)      DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: **P**  
NAME: **OSBORNE, RICHARD M**  
STREET ADDRESS: **ROUTE 2 Box 579**  
CITY - ST - ZIP: **SAMMELLAND KEY, FL 33042**

11 TITLE       Change       Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

TITLE: **V**  
NAME: **SMITH, THOMAS J**  
STREET ADDRESS: **7001 CENTER STREET**  
CITY - ST - ZIP: **MENTOR OH 44060**

21 TITLE       Change       Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

TITLE: **S**  
NAME: **KOENIG, MARILYN S**  
STREET ADDRESS: **9083 LAKESHORE BLVD.**  
CITY - ST - ZIP: **MENTOR OH 44060**

31 TITLE       Change       Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

TITLE: **T**  
NAME: **SMITH, THOMAS J**  
STREET ADDRESS: **7001 CENTER SREET**  
CITY - ST - ZIP: **MENTOR OH 44060**

41 TITLE       Change       Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

TITLE:       Change       Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

51 TITLE       Change       Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

TITLE:       Change       Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

61 TITLE       Change       Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), 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 from an attachment with an address.

SIGNATURE: *Thomas J. Smith*      **THOMAS J. SMITH**      5/19/95      216/974-3770  
Signature and typed or printed name of signing officer or director      Date      Telephone #