



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 105491		2. Name of Corporation SLC Sakonnet Bay, Inc.			
3. Street Address Principal Business Office 1215 MAIN ROAD			City TIVERTON	State RI	Zip 02878-
4. Business Phone No. 4017381100		5. State of Incorporation DELAWARE		6. SIC Code 0	
7. Brief Description of the Character of Business Conducted in Rhode Island TO ACT AS THE GENERAL PARTNER OF SENIOR LIFESTYLE HORIZON BAY LIMITED PARTERSHIP, AN ASSISTED LIVING COMMUNITY.					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Thilo D. Best (President & CEO)			Vice President Name Jon A. DeLuca (Vice President & CFO)		
Street Address 5102 West Laurel Street			Street Address 5102 West Laurel Street		
City Tampa	State FL	Zip 33607	City Tampa	State FL	Zip 33607
Secretary Name Patrick Tribolet (Vice President & Secretary)			Treasurer Name Josephine Scesney (Vice President & Treasurer)		
Street Address 100 Crescent Court, Suite 1000			Street Address 85 Broad Street		
City Dallas	State TX	Zip 75201	City New York	State NY	Zip 10004
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
3,000	COMM	\$0.01 PAR VALUE	3,000	COMM	\$0.01

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV
 05 JAN 18 AM 10:22

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



1 0 5 4 9 1

105491 FBC 01/11/05 10:04:48 AM

File Date 1/18/05

Check No. 419362

By: DA

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Jon A. DeLuca
Signature of Officer
Date 1/13/05

Jon A. DeLuca
Print or Type Name of Officer

Vice President & CFO
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 105491 2. Name of Corporation SLC Sakonnet Bay, Inc.

3. Street Address Principal Business Office 1215 MAIN ROAD City TIVERTON State RI Zip 02878-

4. Business Phone No. 4017381100 5. State of Incorporation DELAWARE 6. SIC Code 5579

7. Brief Description of the Character of Business Conducted in Rhode Island TO ACT AS THE GENERAL PARTNER OF SENIOR LIFESTYLE HORIZON BAY LIMITED PARTERSHIP, AN ASSISTED LIVING COMMUNITY

8. NAMES AND ADDRESSES OF THE OFFICERS: (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS.

President Name Thilo D. Best Street Address 5102 W. Laurel Street, Suite 700 City Tampa State Florida Zip 33607	Vice President Name Jon A. DeLuca Street Address 5102 W. Laurel Street, Suite 700 City Tampa State Florida Zip 33607
---	--

Secretary Name Kevin D. Naughton Street Address 85 Broad Street City New York State NY Zip 10004	Treasurer Name Kevin D. Naughton Street Address 85 Broad Street City New York State NY Zip 10004
--	--

9. NAMES AND ADDRESSES OF THE DIRECTORS: (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS.

Director Name Stuart M. Rothenberg Street Address 85 Broad Street City New York State NY Zip 10004	Director Name NONE Street Address NONE City State Zip
--	---

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
3,000	COMM	\$0.01 PAR VALUE	3,000	Comm	\$0.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



105491 FBC:03/09/04:10:13:28 AM

File Date 5-11-04

Check No. 374589

By: JCP

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer Jon A. DeLuca Date 3/9/04

Print or Type Name of Officer Jon A. DeLuca

Title of Officer CFO & Vice President



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401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No 105491	2. Name of Corporation SLC Sakonnet Bay, Inc.		
3. Street Address Principal Business Office 1215 MAIN ROAD	City TIVERTON	State RI	Zip 02878-
4. Business Phone No. 4017381100	5. State of Incorporation DELAWARE	6. SIC Code 5579	

7. Brief Description of the Character of Business Conducted in Rhode Island
TO ACT AS THE GENERAL PARTNER OF SENIOR LIFESTYLE HORIZON BAY LIMITED PARTERSHIP, AN ASSISTED LIVING COMMUNITY

8. NAMES AND ADDRESSES OF THE OFFICERS (X BOX FOR ATTACHMENT) () FILE IN SPACES BEFORE USING ATTACHMENTS

President Name Thilo D. Best	Vice President Name Jon A. DeLuca
Street Address 5102 W. Laurel Street, Suite 700	Street Address 5102 W. Laurel Street, Suite 700
City Tampa	City Tampa
State Florida	State Florida
Zip 33607	Zip 33607
Secretary Name Kevin D. Naughton	Treasurer Name Kevin D. Naughton
Street Address 85 Broad Street	Street Address 85 Broad Street
City New York	City New York
State NY	State NY
Zip 10004	Zip 10004

9. NAMES AND ADDRESSES OF THE DIRECTORS (X BOX FOR ATTACHMENT) () FILE IN SPACES BEFORE USING ATTACHMENTS

Director Name Stuart M. Rothenberg	Director Name NONE
Street Address 85 Broad Street	Street Address NONE
City New York	City NONE
State NY	State NONE
Zip 10004	Zip NONE
Director Name NONE	Director Name NONE
Street Address NONE	Street Address NONE
City NONE	City NONE
State NONE	State NONE
Zip NONE	Zip NONE

10. SHARES AUTHORIZED (X BOX FOR ATTACHMENT) ()

AUTHORIZED SHARES	Class/Series	Par Value
Number of Shares		
3,000	COMM \$0.01 PAR VALUE	

11. SHARES ISSUED (X BOX FOR ATTACHMENT) ()

ISSUED SHARES	Class/Series	Par Value
Number of Shares		
3,000	Comm	\$0.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



1 0 5 4 9 1

105491 FBC:03/09/04 10:13:28 AM

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: Jon A. DeLuca Date: 3/9/04

Print or Type Name of Officer: Jon A. DeLuca

Title of Officer: CFO & Vice President

**ATTACHMENT TO
2004 ANNUAL REPORT FOR
SLC SAKONNET BAY, INC.
ID#105491**

8. *Names and addresses of the officers:*

Thilo D. Best – Chief Executive Officer & President
5102 W. Laurel Street, Suite 700
Tampa, Florida 33607

Jon A. DeLuca – Chief Financial Officer & Vice President
5102 W. Laurel Street, Suite 700
Tampa, Florida 33607

Ronald Bernstein – Vice President & Assistant Secretary
85 Broad Street
New York, NY 10004

Adam Brooks – Vice President
85 Broad Street
New York, NY 10004

Brahm S. Cramer – Vice President & Assistant Secretary
85 Broad Street
New York, NY 10004

Tom Ferguson – Vice President
100 Crescent Court, Suite 1000
Dallas, TX 75201

Alan S. Kava – Vice President
85 Broad Street
New York, NY 10004

Kevin D. Naughton – Vice President, Secretary & Treasurer
85 Broad Street
New York, NY 10004

Josephine Scesney – Vice President & Assistant Secretary
85 Broad Street
New York, NY 10004

Mitchell S. Weiss – Assistant Treasurer & Assistant Secretary
85 Broad Street

New York, NY 10004



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 105491		2. Name of Corporation SLC Sakonnet Bay, Inc.			
3. Street Address Principal Business Office 1215 Main Road			City Tiverton	State RI	Zip 02878
4. Business Phone No. 4017381100		5. State of Incorporation DELAWARE			6. SIC Code 0
7. Brief Description of the Character of Business Conducted in Rhode Island TO ACT AS THE GENERAL PARTNER OF SENIOR LIFESTYLE HORIZON BAY LIMITED PARTERSHIP, AN ASSISTED LIVING COMMUNITY					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Thilo D. Best		Vice President Name Jon A. DeLuca			
Street Address 5102 W. Laurel Street, Suite 700		Street Address 5102 W. Laurel Street, Suite 700			
City Tampa	State Florida	Zip 33607	City Tampa	State Florida	Zip 33607
Secretary Name Kevin D. Naughton		Treasurer Name Kevin D. Naughton			
Street Address 85 Broad Street		Street Address 85 Broad Street			
City New York	State New York	Zip 10004	City New York	State New York	Zip 10004
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Stuart M. Rothenberg		Director Name			
Street Address 85 Broad Street		Street Address			
City New York	State New York	Zip 10004	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
3,000	COMM	\$0.01 PAR VALUE	3,000	Common	\$0.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



1 0 5 4 9 1

105491 FBC 09/29/03 01:37:47 PM
 File Date 10.3.03
 Check No. 3606 810
 By: [Signature]
 FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 10/3/03
 Signature of Officer
 Jon A. DeLuca
 Print or Type Name of Officer
 Vice President
 Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **105491**
2. Name of Corporation **SLC Sakonnet Bay, Inc.**
3. Street Address Principal Business Office
469 Centerville Rd., Suite 208
4. Business Phone No. **401-738-1100**
5. State of Incorporation **DELAWARE**

City **Warwick** State **RI** Zip **02886**
6. SIC Code **0**

7. Brief Description of the Character of Business Conducted in Rhode Island

Assisted Living

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) X FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **Thilo D. Best**
Street Address **111 E. Wacker Dr., Suite 2450**
City **Chicago** State **IL** Zip **60601**

Vice President Name **Jon A. DeLuca**
Street Address **111 E. Wacker Dr., Suite 2450**
City **Chicago** State **IL** Zip **60601**

Secretary Name **Daniel N. Neidich**
Street Address **85 Broad St.**
City **New York** State **NY** Zip **10004**

Treasurer Name **Kevin D. Naughton**
Street Address **85 Broad St.**
City **New York** State **NY** Zip **10004**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name **Stuart M. Rothenberg**
Street Address **85 Broad St.**
City **New York** State **NY** Zip **10004**

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
3,000 COMM \$0.01 PAR VAL

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
0

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 0 5 4 9 1 *

File Date: **3.29.02**
Check No.: **4468**
By: **[Signature]**

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] **2/18/02**
Signature of Officer Date
Jon A. DeLuca
Print or Type Name of Officer
CEO, Vice President
Title of Officer

ANNEX A

NAME

OFFICE

Douglas A. Kessler

Vice President

Michael K. Klingher

Vice President, Assistant Secretary, Assistant
Treasurer

Ralph F. Rosenberg

Vice President, Assistant Secretary, Assistant
Treasurer

Ron Bernstein

Assistant Vice President

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001
Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **105491** 2. Name of Corporation **SLC SARDINIA Bay, Inc.**

3. Street Address Principal Business Office **1215 Main Road** City **Tiverton** State **RI** Zip **02878**
4. Business Phone No. **401 624-1880** 5. State of Incorporation **DELAWARE** 6. SIC Code **5579**

7. Brief Description of the Character of Business Conducted in Rhode Island
Assisted Living

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **Stuart M. Rothenberg**
Street Address **85 Broad Street**
City **New York** State **NY** Zip **10004**

Vice President Name **Stephen J. Levy**
Street Address **111 E. Wacker Dr., Suite 2400**
City **Chicago** State **IL** Zip **60601**

Secretary Name **Kevin D. Naughton**
Street Address **85 Broad Street**
City **New York** State **NY** Zip **10004**

Treasurer Name **Kevin D. Naughton**
Street Address **85 Broad Street**
City **New York** State **NY** Zip **10004**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name **Stuart M. Rothenberg**
Street Address **85 Broad Street**
City **New York** State **NY** Zip **10004**

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
3,000 COMM \$0.01 PAR VAL

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
1 Common \$.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 0 5 4 9 1 *

4-27-01

File Date

5509

Check No.

2

By

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer **[Signature]** Date **3/1/01**

Print or Type Name of Officer **Stephen J. Levy**

Title of Officer **V.P.**

Corporate Officers

<u>Name</u>	<u>Office</u>
Michael K. Klinger 85 Broad Street New York, NY 10004	V.P.
Ralph K. Rosenberg 85 Broad Street New York, NY 10004	V.P., Assistant Secretary
David M. Weil 85 Broad Street New York, NY 10004	V.P.
Edward M. Siskind 85 Broad Street New York, NY 10004	V.P., Assistant Secretary
Elizabeth A. O'Brien 85 Broad Street New York, NY 10004	V.P., Assistant Secretary
Todd A. Williams 85 Broad Street New York, NY 10004	V.P., Assistant Secretary, Treasurer
Jerrold H. Frumm 111 E. Wacker Dr., Suite 2400 Chicago, IL 60601	V.P., Assistant Secretary
Ted R. Jadwin 111 E. Wacker Dr., Suite 2800 Chicago, IL 60601	Assistant Secretary



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **105491** 2. Name of Corporation **SLC Sakonnet Bay, Inc.**

3. Street Address Principal Business Office **1215 Main Road** City **Tiverton** State **RI** Zip **02878**
4. Business Phone No. **401-624-1880** 5. State of Incorporation **DELAWARE** 6. SIC Code **6-9472**

7. Brief Description of the Character of Business Conducted in Rhode Island
Retirement & Nursing Community

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) X FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Stuart M. Rothenberg	Vice President Name Stuart M. Rothenberg
Street Address 85 Broad Street	Street Address 85 Broad Street
City New York State NY Zip 10004	City New York State NY Zip 10004
Secretary Name Kevin D. Naughton	Treasurer Name Kevin D. Naughton
Street Address 85 Broad Street	Street Address 85 Broad Street
City New York State NY Zip 10004	City New York State NY Zip 10004

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Stuart M. Rothenberg	Director Name
Street Address 85 Broad Street	Street Address
City New York State NY Zip 10004	City State Zip
Director Name	Director Name
Street Address	Street Address
City State Zip	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
3,000 COMM \$0.01 PAR VAL

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
1 Common \$0.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 0 5 4 9 1 *

3/17/00

File Date: _____

Check No.: **4202**

By: **[Signature]**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] **2/3/00**
Signature of Officer Date

Stephen J. Levy
Print or Type Name of Officer

V.P.
Title of Officer

HORIZON BAY CORPORATE OFFICERS

Officers Continued -

Michael Klingher
Vice President
85 Broad Street
New York, NY 10004
212-902-1000
SS#117-42-1567
DOB: 1/24/56

Todd A. Williams
Vice President, Asst Secretary and Treasurer
85 Broad Street
New York, NY 10004
212-902-1000
SS#450-29-9678
DOB: 4/26/60

Ralph Rosenberg
Vice President and Assistant Secretary
85 Broad Street
New York, NY 10004
212-902-1000
SS# 333-42-1940
DOB: 11/16/64

Jerrod H. Frumm
Vice President and Assistant Secretary
111 East Wacker Drive, Suite 2400
Chicago, IL 60601
312-673-4333
SS#348-46-8861
DOB: 4/23/53

David M. Weil
Vice President
85 Broad Street
New York, NY 10004
212-902-1000
SS#029-54-5927
DOB: 11/28/62

Stephen J. Levy
V. P, General Counsel and Assistant Secretary
111 E. Wacker Drive, Suite 2400
Chicago, IL 60601
312-673-4333
SS#493-56-1860
DOB: 1/19/66

Edward M. Siskind
Vice President and Assistant Secretary
85 Broad Street
New York, NY 10004
212-902-1000
SS#093-42-6142
DOB: 1/24/66

Ted R. Jadwin
Assistant Secretary
30 N. LaSalle St.
Suite 2900
Chicago, IL 60601
312-602-2000
SS#179-36-9053
DOB: 10/10/48

Elizabeth A. O'Brien
Vice President and Assistant Secretary
85 Broad Street
New York, NY 10004
212-902-1000
SS# 152-70-9498
DOB: 4/27/65