

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705727

FILED
Apr 13, 2005
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF HOMES FOR THE AGING, INC.

Current Principal Place of Business:

1812 RIGGINS RD.
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

1812 RIGGINS RD.
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 23-7335883

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYD, JANEGALE
1812 RIGGINS ROAD
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOETZ, MARTY
Address: 1140 OLD ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: BUXO, JUDI
Address: 400 LOCUST ST., STE. 820
City-St-Zip: DES MOINES, IA 50309

Title: S () Delete
Name: IRWIN, DANIEL H
Address: 6901 SW 18TH ST. SUITE 301
City-St-Zip: BOCA RATON, FL 33433

Title: C () Delete
Name: BOORD, SCOTT
Address: 4847 FRED GLADSTONE DR.
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D () Delete
Name: NORTON, JACK M
Address: 700 MEASE PLAZA
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: LYNN, RICHARD A
Address: 740 N WOODLAND BLVD
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GOETZ, MARTY
Address: 11401 OLD ST AUGUSTINE RD
City-St-Zip: JACKSONVILLE, FL 32259

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANEGALE BOYD

CEO

04/13/2005

Electronic Signature of Signing Officer or Director

Date