

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N46752

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** PORT SAINT JOHN SENIOR'S INC.

**Current Principal Place of Business:**

6280 AINSWORTH RD  
PORT ST. JOHN, FL 32927

**New Principal Place of Business:**

**Current Mailing Address:**

6280 AINSWORTH RD  
PORT ST. JOHN, FL 32927

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SULLIVAN, MARTIN  
6280 AINSWORTH RD  
PORT ST. JOHN, FL 32927 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: P  
Name: SULLIVAN, MARTIN H  
Address: 6280 AINSWORTH RD  
City-St-Zip: PORT ST. JOHN, FL 32927

Title: TRE  
Name: SULLIVAN, BRIGITTE M  
Address: 6280 AINSWORTH RD  
City-St-Zip: COCOA, FL 32927

Title: SECR  
Name: HOOVER, HELEN SECRETA  
Address: 7190 PLUTO AVE  
City-St-Zip: PORT ST JOHN, FL 32927 BR

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** MARTIN SULLIVAN

**PRES**

**03/15/2011**

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date