## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000008514

Entity Name: VESTCOR COMMUNITIES, INC.

MOORE, CLARENCE S

JACKSONVILLE, FL 32257

3020 HARTLEY ROAD, SUITE 300

Name:

Address: City-St-Zip: FILED Apr 16, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3020 HARTLEY ROAD STE 300 JACKSONVILLE, FL 32257 **Current Mailing Address: New Mailing Address:** 3020 HARTLEY ROAD STE 300 JACKSONVILLE, FL 32257 FEI Number: 56-2312405 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RAX CO 50 N LAURA STREET **SUITE 3300** JACKSONVILLE, FL 32202 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition ROOD, JOHN D Name: Name: 3020 HARTLEY ROAD, SUITE 300 Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: ( ) Delete Title: VST Title: () Change () Addition Name: MORGAN, WILLIAM L Name: 3020 HARTLEY ROAD, SUITE 300 Address: Address: JACKSONVILLE, FL 32257 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN D. ROOD OFCR 04/16/2008