

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21440

FILED
Apr 23, 2007
Secretary of State

Entity Name: THE MANORS OF BRYN MAWR, INC.

Current Principal Place of Business:

1350 ORANGE AVE., SUITE 100
WINTER PARK, FL 32789 US

New Principal Place of Business:

C/O ATTWOOD-PHILLIPS INC
1350 ORANGE AVE STE 100
WINTER PARK, FL 327894932 US

Current Mailing Address:

1350 ORANGE AVE., SUITE 100
WINTER PARK, FL 32789 US

New Mailing Address:

C/O ATTWOOD-PHILLIPS INC
1350 ORANGE AVE STE 100
WINTER PARK, FL 327894932 US

FEI Number: 59-2880112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, ROGER V
1350 ORANGE AVE., SUITE 100
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

GASPERONI & FLETCHER PA
931 WEKIVA SPRINGS RD
LONGWOOD, FL 32779 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: EMIL GASPERONI

04/23/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOHNSON, GREGG
Address: 5433-A LAKE MARGARET DR
City-St-Zip: ORLANDO, FL 32812

Title: STD () Delete
Name: PARKER, BARBARA
Address: 5433-G LAKE MARGARET DR
City-St-Zip: ORLANDO, FL 32812

Title: D () Delete
Name: ACKERMAN, JESSE
Address: 5449-J LAKE MARGARET DR
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PECK, BRANDI
Address: 5465-E LAKE MARGARET DR
City-St-Zip: ORLANDO, FL 32812

Title: DPT (X) Change () Addition
Name: PARKER, BARBARA
Address: 5433-G LAKE MARGARET DR
City-St-Zip: ORLANDO, FL 32812

Title: DVS (X) Change () Addition
Name: ACKERMAN, JESSE
Address: 5449-J LAKE MARGARET DR
City-St-Zip: ORLANDO, FL 32812

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA PARKER

DPT

04/23/2007

Electronic Signature of Signing Officer or Director

Date