#### 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J33017

Entity Name: ALBANY AVENUE ADULT CONGREGATE LIVING FACILITY, INC.

FILED Feb 24, 2014 Secretary of State CC0397752220

# **Current Principal Place of Business:**

211 N ALBANY AVE TAMPA, FL 33606

### **Current Mailing Address:**

211 N ALBANY AVE TAMPA FL 33606

FEI Number: 59-2537243 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

MANESCALA, PETER D 1920 W NORTH 'B' ST TAMPA, FL 33606 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

#### Officer/Director Detail:

Title PSD Title VT

NameMANESCALA, PETER DNameMANESCALA, JACKIE LAddress1920 W NORTH 'B' STAddress1920 W NORTH 'B' STCity-State-Zip:TAMPA FL 33606City-State-Zip:TAMPA FL 33606

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

SIGNATURE: PETER DAVID MANESCALA

**PRESIDENT** 

02/24/2014