

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000008728

Entity Name: FLORIDA ASSISTED LIVING MANAGEMENT PROVIDER, INC.

Current Principal Place of Business:

904 MANATEE WAY
HOLLYWOOD, FL 33019

Current Mailing Address:

904 MANATEE WAY
HOLLYWOOD, FL 33019 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHWARTZ, MICHAEL
904 MANATEE WAY
HOLLYWOOD, FL 33019 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: MICHAEL SCHWARTZ

03/17/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name KANETI, RICKI
Address 904 MANATEE WAY
City-State-Zip: HOLLYWOOD FL 33019

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: RICKI KANETI

P

03/17/2013

Electronic Signature of Signing Officer/Director Detail

Date