

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708863

FILED  
Feb 16, 2005  
Secretary of State

Entity Name: PENNEY RETIREMENT COMMUNITY, INC.

**Current Principal Place of Business:**

3495 HOFFMAN STREET  
PENNEY FARMS, FL 320790555

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 555  
PENNEY FARMS, FL 320790555

**New Mailing Address:**

FEI Number: 59-0624420

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHIEF FINANCIAL OFFICER  
P.O. BOX 6200 32314-6200  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399 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: D ( ) Delete  
Name: QUARITIUS, JACK H  
Address: 2729 EAST HOLLY POINT ROAD  
City-St-Zip: ORANGE PARK, FL 32073

Title: VD ( ) Delete  
Name: HAMMOCK, MICHAEL T  
Address: 7800 BELFORT PKWY STE 165  
City-St-Zip: JACKSONVILLE, FL 32256

Title: CD ( ) Delete  
Name: PROCTOR, WILLIAM L  
Address: 74 KING STREET  
City-St-Zip: ST AUGUSTINE, FL 32084

Title: D ( ) Delete  
Name: ZELLNER, MARY L  
Address: 4160 LEWIS AVENUE  
City-St-Zip: PENNEY FARMS, FL 32079

Title: SD ( ) Delete  
Name: SMYRES, ROBERT W  
Address: 4445 WILBANKS AVENUE, APT. 404-A  
City-St-Zip: PENNEY FARMS, FL 32079

Title: D ( ) Delete  
Name: BEYER, NORMAN S  
Address: 3503 DWIGHT STREET  
City-St-Zip: PENNEY FARMS, FL 32079

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CD (X) Change ( ) Addition  
Name: HAMMOCK, MICHAEL T  
Address: 7800 BELFORT PKWY STE 165  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D (X) Change ( ) Addition  
Name: PROCTOR, WILLIAM L  
Address: 74 KING STREET  
City-St-Zip: ST AUGUSTINE, FL 32084

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: SMYRES, ROBERT W  
Address: 4445 WILBANKS AVENUE, APT. 404-A  
City-St-Zip: PENNEY FARMS, FL 32079

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL T. HAMMOCK

SD

02/16/2005

Electronic Signature of Signing Officer or Director

Date