2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710065

FILED Mar 31, 2011 Secretary of State

Entity Name: GARDEN MANOR OF NAPLES, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O ABILITY MANAGEMENT, INC 6736 LOANE OAK BLVD NAPLES, FL 34109

Current Mailing Address: New Mailing Address:

C/O ABILITY MANAGEMENT, INC 6736 LOANE OAK BLVD NAPLES, FL 34109

FEI Number: 59-1583708 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:

ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD
NAPLES, FL 34109 US
LIVELY, DENNIS F
C/O ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD
NAPLES, FL 34109 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: DENNIS F LIVELY 03/31/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: PRINCE, RICHARD Address: 213-A 8TH AVE S City-St-Zip: NAPLES, FL 34102

Title: P

 Name:
 MAYER, LINDA

 Address:
 215 B 8TH AVE S

 City-St-Zip:
 NAPLES, FL 34102

Title: T

Name: BICKELMANN, BRUCE Address: 205-A 8TH AVE SOUTH City-St-Zip: NAPLES, FL 34102

Title: VF

 Name:
 BECKMAN, LOVETTA

 Address:
 211-B 8TH AVE

 City-St-Zip:
 NAPLES, FL 34102

Title: S

Name: JULIANO, CATHERINE Address: 221-A 8TH AVE S City-St-Zip: NAPLES, FL 34102

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

SIGNATURE: DENNIS F LIVELY RA 03/31/2011