

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 725994

**FILED**  
**Jun 15, 2011**  
**Secretary of State**

**Entity Name:** MAYFLOWER RETIREMENT CENTER, INC.

**Current Principal Place of Business:**

1620 MAYFLOWER CT.  
WINTER PARK, FL 32792

**New Principal Place of Business:**

**Current Mailing Address:**

1620 MAYFLOWER CT.  
WINTER PARK, FL 32792

**New Mailing Address:**

**FEI Number:** 59-2617174

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MCGUFFIN, DAVID  
1620 MAYFLOWER CT.  
WINTER PARK, FL 32792 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: CEOP  
Name: MCGUFFIN, DAVID  
Address: 895 WILLOW RUN LANE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: TD  
Name: CULPEPPER, BLAIR  
Address: 440 SEYMOUR AVE  
City-St-Zip: WINTER PARK, FL 32789

Title: S  
Name: BOYETT, DONNA  
Address: 1565 WILD FOX DR  
City-St-Zip: CASSELBERRY, FL 32707

Title: C  
Name: ROBERTS, ROBIN  
Address: 300 S INTERLACHEN AVE  
City-St-Zip: WINTER PARK, FL 32789

Title: 1VCD  
Name: SANDQUIST, DIANE  
Address: 1390 AUGUSTA BLVD  
City-St-Zip: WINTER SPRINGS, FL 32708

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: CHERYL LANE

CFO

06/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date