2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008
Secretary of State

DOCUMENT# 726428

Entity Name: ST. FRANCIS MANOR OF VERO BEACH, FLORIDA, INC.

Current Principal Place of Business:

1750 20TH AVENUE
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

1750 20TH AVENUE
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 23-7350059 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCOTT, LINDA
1750 20 AVENUE
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

DREWER, MARY ALICE
1750 20 AVENUE
VERO BEACH, FL 32960 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: MARY ALICE DREWER 01/28/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PE ( ) Delete
Name: ZORC, FRANK L
Address: 1695 20TH AVE.
City-St-Zip: VERO BEACH, FL 32960

Title: PD ( ) Delete
Name: GIBBONS, MORRIS A
Address: PO BOX 651247
City-St-Zip: VERO BEACH, FL 32965

Title: TD ( ) Delete
Name: NELSON, PATRICIA
Address: 1145 6TH PLACE
City-St-Zip: VERO BEACH, FL 32960

Title: SD ( ) Delete
Name: AVRIL, MARGARET
Address: 1930 W. HAMPTON CT.
City-St-Zip: VERO BEACH, FL 32965

Title: VP ( ) Delete
Name: COLONTRELLE, LINDA
Address: 419 21ST STREET SE
City-St-Zip: VERO BEACH, FL 32960

Title: T ( ) Delete
Name: SCHACHT, LOUIS
Address: 2260 VERO BEACH AVE
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARY ALICE DREWER DIRE 01/28/2008
Electronic Signature of Signing Officer or Director Date