

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745569

FILED
Feb 04, 2010
Secretary of State

Entity Name: NORTH FLORIDA RETIREMENT VILLAGE, INC.

Current Principal Place of Business:

8000 NW 27 BLVD.
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

8000 NW 27 BLVD.
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 59-1912330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEMONTOLLIN, STEPHEN J
4300 NW 89TH BLVD.
GAINESVILLE, FL 32606 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: DC
Name: LENTZ, FRANKLIN SR
Address: 635 NE 1ST STREET
City-St-Zip: GAINESVILLE, FL 32601 US

Title: DVC
Name: BROWN, LEVEDA
Address: 4001 NW 9TH COURT
City-St-Zip: GAINESVILLE, FL 32605 US

Title: DT
Name: VILLEMAIRE, CAROL
Address: 5931 NW 1ST PLACE
City-St-Zip: GAINESVILLE, FL 32607 US

Title: DS
Name: LARCHE, JAMES JR
Address: 4041 NW 37TH PLACE, SUITE B
City-St-Zip: GAINESVILLE, FL 32606 US

Title: DCEO
Name: GALLAGHER, MICHAEL P
Address: 4300 NW 89TH BLVD.
City-St-Zip: GAINESVILLE, FL 32606 US

Title: P
Name: HART, TROY R
Address: 4300 NW 89TH BLVD.
City-St-Zip: GAINESVILLE, FL 32606 US

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: STEPHEN J. DEMONTMOLLIN

AS

02/04/2010

Electronic Signature of Signing Officer or Director

Date