2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005855

City-St-Zip:

Entity Name: NEW YORK LONG TERM CARE BROKERS, LTD. INC.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
	IOON EXECU ⁻ PARK, NY 120					
Current Mailing Address:			New Maili	New Mailing Address:		
	IOON EXECU [*] PARK, NY 120					
FEI Number	: 14-1764648	FEI Number Applied For ()	FEI Number Not App	Dicable () Certificate of Status Desired ()		
Name and	Address of C	Surrent Registered Agent	Name and	d Address of New Registered Agent:		
DUNN, DA 2180 IMMO NAPLES, I	OKLEE RD., SI	JITE 209 IS				
	named entity e of Florida.	submits this statement for th	ne purpose of changing i	its registered office or registered agent, or both,		
SIGNATUI	RE:					
	Electror	nic Signature of Registered	Agent	Date		
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	JOHNSON, KE	EXECUTIVE PARK	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	KELLY, PETER	EXECUTIVE PARK	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:		Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition CLAIR, GARY 11 HALFMOON EXECUTIVE PARK CLIFTON PARK, NY 12065		
Title: Name: Address:	()) Delete	Title: Name: Address:	T () Change (X) Addition O'CONNOR, JILL 11 HALFMOON EXECUTIVE PARK		

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

City-St-Zip:

CLIFTON PARK, NY 12065

SIGNATURE: PETER J KELLY COO 04/28/2008