

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001176

FILED
Aug 02, 2008
Secretary of State

Entity Name: GRAHAM VINTAGE CARE, INC.

Current Principal Place of Business:

4600 GRANITE MTN CT
BAKERFIELD, CA 93311

New Principal Place of Business:

Current Mailing Address:

4600 GRANITE MTN
BAKERFIELD, CA 93311

New Mailing Address:

4600 GRANITE MTN CT
BAKERFIELD, CA 93311

FEI Number: 77-0524589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, LETICIA R SEC/TRE
4600 GRANITE MTN CT
BAKERSFIELD, FL 93311 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: GRAHAM, KELLY A
Address: 4600 GRANITE MTN CT
City-St-Zip: BAKERFIELD, CA 93311

Title: VCVP () Delete
Name: GRAHAM, LETICIA R
Address: 4600 GRANITE MTN CT
City-St-Zip: BAKERFIELD, CA 93311

Title: ST () Delete
Name: GRAHAM, LETICIA R
Address: 4600 GRANITE MTN CT
City-St-Zip: BAKERFIELD, CA 93311

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:

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.

SIGNATURE: LETICIA R. GRAHAM

SEC

08/02/2008

Electronic Signature of Signing Officer or Director

Date