

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005413

FILED
Feb 04, 2009
Secretary of State

Entity Name: EDEN PARK HEALTH SERVICES, INC.

Current Principal Place of Business:

45 LEARNED STREET
ALBANY, NY 12207

New Principal Place of Business:

Current Mailing Address:

45 LEARNED STREET
ALBANY, NY 12207

New Mailing Address:

FEI Number: 14-1548928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRARY, LAWRENCE E III ESQ
555 COLORADO AVE
STUART, FL 34994 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: HOFFMAN, SCOTT H
Address: 4586 S.W. LONG BAY DRIVE
City-St-Zip: PALM CITY, FL 34990

Title: DVST () Delete
Name: MENDESON, ALTON P JR
Address: 115 MOSHER ROAD
City-St-Zip: GLENMONT, NY 12077

Title: D () Delete
Name: GORMLEY, WILLIAM
Address: 441 LOCKHART MOUNTAIN ROAD
City-St-Zip: LAKE GEORGE, NY 12845

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: ALTON P MENDESON JR

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02/04/2009

Electronic Signature of Signing Officer or Director

Date