2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2012
Secretary of State

DOCUMENT# F09000003871

Entity Name: USA SENIOR CARE NETWORK, INCORPORATED

Current Principal Place of Business:

1250 SOUTH CAPITAL OF TEXAS HIGHWAY
BLDG 3, SUITE 500
AUSTIN, TX 78746

New Principal Place of Business:

Current Mailing Address:

7301 N. 16TH STREET, SUITE 201
PHOENIX, AZ 85020

New Mailing Address:

FEI Number: 74-2810999 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: PD
Name: BOGLE, G. MICHAEL
Address: 7301 N 16TH STREET, SUITE 201
City-St-Zip: PHOENIX, AZ 85020

Title: VP
Name: PARKS, SHIRLEY
Address: 7301 N 16TH STREET, SUITE 201
City-St-Zip: PHOENIX, AZ 85020

Title: T
Name: GODLASKI, MIKI
Address: 7301 N 16TH STREET, SUITE 201
City-St-Zip: PHOENIX, AZ 85020

Title: S
Name: SMITH, DONNA
Address: 1250 S CAPITAL OF TEXAS HWY, BLDG 3/500
City-St-Zip: AUSTIN, TX 78746

Title: D
Name: BOGLE, GEORGE E
Address: 1250 S CAPITAL OF TEXAS HWY, BLDG 3/500
City-St-Zip: AUSTIN, TX 78746

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

SIGNATURE: SHIRLEY PARKS VP 03/06/2012

Electronic Signature of Signing Officer or Director Date