## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F93000000463

Address:

City-St-Zip:

FILED May 14, 2008 Secretary of State

Entity Nai	me: ROSEWO	OOD MANOR OF PENSACOL	A, INC.			
Current Principal Place of Business:			New Principal Place of Business:			
	ARD AVENUE HASE, MD 206	E, 12TH FLOOR 615 US				
Current Mailing Address:			New Mailing Address:			
	ARD AVENUE HASE, MD 206	F, 12TH FLOOR 815 US				
FEI Number: 64-0821299 FEI Number Applied For ( )		FEI Number Not Applicable ( ) Certificate of Status Desired ( )		Certificate of Status Desired ( )		
Name and	Address of C	current Registered Agent:	Name and	Name and Address of New Registered Agent:		
1200 SOU	PORATION SYS TH PINE ISLAI ION, FL 33324	ND RD				
The above in the State	named entity s e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATU	RE:					
	Electron	ic Signature of Registered Age	ent	Date		
Election Car	mpaign Financing	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( ) BELL, SCOTT 3 2 N PALAFOX 5 PENSACOLA, F	STREET	Title: Name: Address: City-St-Zip:	PIECZYNSK 30699 RUSS	(X) Change ( ) Addition I, JAMES SELL RANCH ROAD, #200, VILLAGE, CA 91362	
Title: Name: Address: City-St-Zip:	T ( ) TOLAN, JOHN ( 2 N PALAFOX ( PENSACOLA, F	STREET	Title: Name: Address: City-St-Zip:	LIPSON, JEI 4445 WILLA	(X) Change()Addition FFREY RD AVENUE, SE, MD 20815	
Title: Name: Address: City-St-Zip: Title: Name: Address:	FOSTER, DANA 2 N PALAFOX S PENSACOLA, F	ST FL 32502 Delete EDWARD	Title: Name: Address: City-St-Zip: Title: Name: Address:	STONE, LISA 30699 RUSS WESTLAKE V BRADSHAW	SELL RANCH ROAD, #200, VILLAGE, CA 91362 (X) Change ( ) Addition	
City-St-Zip: Title: Name:	PENSACOLA, F	EL 32502 Delete	City-St-Zip: Title: Name:	V	SE, MD 20815  ( ) Change (X) Addition GLIATO, CAROLYN	

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.

Address:

City-St-Zip:

4445 WILLARD AVENUE, CHEVY CHASE, MD 20815

SIGNATURE: JEFFREY LIPSON T 05/14/2008