## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F94000001426

Entity Name: SAN JOSE OF ROCHESTER, INC.

FILED Jan 29, 2009 Secretary of State

Current P	Principal Place	e of Business:	New Principal P	New Principal Place of Business:	
640-642 KREAG RD PITTSFORD, NY 14534				642 KREAG ROAD, SUITE 302 PITTSFORD, NY 14534	
Current N	lailing Addre	ss:	New Mailing Ad	dress:	
640-642 KREAG RD PITTSFORD, NY 14534				642 KREAG ROAD, SUITE 302 PITTSFORD, NY 14534	
FEI Number	: 16-1451703	FEI Number Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
The above	e of Florida. RE:			stered office or registered agent, or both,  Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CH/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD ( MARTIN, JAME 642 KREAG RI PITTSFORD, N	D	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VCSD ( DAGRACA, GE 642 KREAG RI PITTSFORD, N	D	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T ( GORDON, STE 40 OFFICE PA PITTSFORD, N	RK WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MAUREEN STRICKER MGR 01/29/2009