

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2007 8:00 am**  
**Secretary of State**

04-18-2007 90181 038 \*\*\*150.00

**DOCUMENT # F98000000576**

1. Entity Name  
FLORIDA-LTC, INC.



Principal Place of Business  
31365 OAK CREST DRIVE  
SUITE 200  
WESTLAKE VILLAGE, CA 91361

Mailing Address  
31365 OAK CREST DRIVE  
SUITE 200  
WESTLAKE VILLAGE, CA 91361

4006775J



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03302007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

71-0720518

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEXIS DOCUMENT SERVICES, INC.  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DCEO ☐ Delete  
NAME DIMITRIADIS, ANDRE C  
STREET ADDRESS 31365 OAK CREST DRIVE #200  
CITY-ST-ZIP WESTLAKE VILLAGE, CA 91361

TITLE VCIO ☐ Delete  
NAME MALIN, CLINT  
STREET ADDRESS 31365 OAK CREST DRIVE #200  
CITY-ST-ZIP WESTLAKE VILLAGE, CA 91361

TITLE PCFO ☐ Delete  
NAME SIMPSON, WENDY L  
STREET ADDRESS 31365 OAK CREST DRIVE #200  
CITY-ST-ZIP WESTLAKE VILLAGE, CA 91361

TITLE VPS ☐ Delete  
NAME SHELLEY-KESSLER, PAMELA  
STREET ADDRESS 31365 OAK CREST DRIVE #200  
CITY-ST-ZIP WESTLAKE VILLAGE, CA 91361

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DIRECTOR ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE CEO P ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SUP-CFO-S ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Pamela Shelley-Kessler*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/07  
Date

805-981-8655  
Daytime Phone #