

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001924

FILED  
Jul 05, 2006  
Secretary of State

Entity Name: EASTVIEW MANOR COMMUNITY INC

## Current Principal Place of Business:

709 E. APIX CIRCLE  
JUPITER, FL 33458

## New Principal Place of Business:

## Current Mailing Address:

709 E. APIX CIRCLE  
JUPITER, FL 33458

## New Mailing Address:

FEI Number: 41-2026399      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

GORE, SUSAN M  
709 E. APIX CIRCLE  
JUPITER, FL 33458      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: C      ( ) Delete  
Name: GORE, SUSAN M  
Address: 709 E. APIX CIRCLE  
City-St-Zip: JUPITER, FL 33458

Title: VD      ( ) Delete  
Name: SEAVERS, MELANIE  
Address: RED DR.  
City-St-Zip: JUPITER, FL 32458

Title: SD      ( ) Delete  
Name: GORE, SUSAN M  
Address: 709 E. APIX CIRCLE  
City-St-Zip: JUPITER, FL 33458

Title: TD      ( ) Delete  
Name: SANCHEZ, STEPHANIE  
Address: 409 RED DRIVE  
City-St-Zip: JUPITER, FL 33458

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD      (X) Change ( ) Addition  
Name: SEAVERS, MELANIE  
Address: REO DR.  
City-St-Zip: JUPITER, FL 32458

Title: SD      (X) Change ( ) Addition  
Name: HILL, KATHY  
Address: 508 REO DR.  
City-St-Zip: JUPITER, FL 33458

Title: TD      (X) Change ( ) Addition  
Name: SANCHEZ, STEPHANIE  
Address: 409 REO DRIVE  
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN M. GORE

C

07/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date