

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 26, 2007 8:00 am**  
**Secretary of State**

01-26-2007 90035 040 \*\*\*\*61.25

<b>DOCUMENT # N02000002137</b>					
<b>1. Entity Name</b> THE SENIOR FOUNDATION CORP.					
<b>Principal Place of Business</b> 3200 N.FEDERAL HWY 206-22 BOCA RATON, FL 33431			<b>Mailing Address</b> POST OFFICE BOX 1772 BOCA RATON, FL 33429		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 04-3630165	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  HOFFMAN, STUART C P.A. 2600 N MILITARY TRAIL STE 290 BOCA RATON, FL 33431			<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;">FL</span> Zip Code		
<b>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.</b>					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	PD GORDON, J.ROBERT <input type="checkbox"/> Delete 401 NORTHEAST MIZNER BOULEVARD STE T-303 BOCA RATON, FL 33432		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	VD ROLLENHAGEN, DIANE H <input type="checkbox"/> Delete 401 NORTHEAST MIZNER BOULEVARD STE T-303 BOCA RATON, FL 33432		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	SD DAVIS, JILL S <input type="checkbox"/> Delete 401 NORTHEAST MIZNER BOULEVARD STE T-303 BOCA RATON, FL 33432		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	T VAGA-HAUSE, CAROL <input type="checkbox"/> Delete 3200 N. FEDERAL HWY., STE 206-22 BOCA RATON, FL 33431		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	Treasurer Robert Cantile <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3200 N Federal Hwy Ste 206-22 BOCA RATON FL 33431	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	CFO HONICKMAN, LLOYD <input type="checkbox"/> Delete 401 NE MIZNER BLVD., APT T508 BOCA RATON, FL 33432		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		<b>TITLE</b> NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>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 617, 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.</b>					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			1/27/07 <span style="float: right;">361-361-9091</span> <small>Date Daytime Phone #</small>		