

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002137

FILED
Jan 27, 2009
Secretary of State

Entity Name: THE SENIOR FOUNDATION CORP.

Current Principal Place of Business:

3200 N.FEDERAL HWY
206-22
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1772
BOCA RATON, FL 33429

New Mailing Address:

FEI Number: 04-3630165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFMAN, STUART C P.A.
2600 N MILITARY TRAIL
STE 290
BOCA RATON, FL 33431 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: PD () Delete
Name: GORDON, J.ROBERT
Address: 401 NORTHEAST MIZNER BOULEVARD STE T-303
City-St-Zip: BOCA RATON, FL 33432

Title: VD () Delete
Name: ROLLENHAGEN, DIANE H
Address: 401 NORTHEAST MIZNER BOULEVARD STE T-303
City-St-Zip: BOCA RATON, FL 33432

Title: SD () Delete
Name: DAVIS, JILL S
Address: 401 NORTHEAST MIZNER BOULEVARD STE T-303
City-St-Zip: BOCA RATON, FL 33432

Title: T () Delete
Name: GENTILE, ROBERT
Address: 3200 NORTH FEDERAL HWY STE 206-22
City-St-Zip: BOCA RATON, FL 33431

Title: CFO (X) Delete
Name: HONICKMAN, LLOYD
Address: 401 NE MIZNER BLVD., APT T506
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GORDON, J.ROBERT
Address: 3200 N FEDERAL HWY
City-St-Zip: BOCA RATON, FL 33431

Title: VD (X) Change () Addition
Name: ROLLENHAGEN, DIANE H
Address: 3200 N FEDERAL HWY
City-St-Zip: BOCA RATON, FL 33431

Title: SD (X) Change () Addition
Name: DAVIS, JILL S
Address: 3200 NFEDERAL HWY
City-St-Zip: BOCA RATON, FL 33431

Title: T (X) Change () Addition
Name: HONICKMAN, LLOYD
Address: 3200 NORTH FEDERAL HWY
City-St-Zip: BOCA RATON, FL 33431

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LLOYD HONICKMAN

T

01/27/2009

Electronic Signature of Signing Officer or Director

Date