

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010986

FILED
Feb 12, 2010
Secretary of State

Entity Name: PENSACOLA RETIREMENT VILLAGE IV, INC.

Current Principal Place of Business:

80 WEST LUCERNE CIRCLE
ORLANDO, FL 32801

New Principal Place of Business:

80 WEST LUCERNE CIRCLE
ORLANDO, FL 32801 US

Current Mailing Address:

80 WEST LUCERNE CIRCLE
ORLANDO, FL 32801

New Mailing Address:

80 WEST LUCERNE CIRCLE
ORLANDO, FL 32801 US

FEI Number: 55-0855004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KEITH, HENRY T
80 WEST LUCERNE CIRCLE
ORLANDO, FL 32801 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: D
Name: SCHITTER, GRETCHEN
Address: 80 WEST LUCERNE CIRCLE
City-St-Zip: ORLANDO, FL 32801 US

Title: D
Name: BELL, WILLIAM O
Address: 80 WEST LUCERNE CIRCLE
City-St-Zip: ORLANDO, FL 32801 US

Title: EVP
Name: EMERSON, JAMES E
Address: 80 WEST LUCERNE CIRCLE
City-St-Zip: ORLANDO, FL 32801 US

Title: D
Name: BARNES, TRAVIS S
Address: 80 WEST LUCERNE CIRCLE
City-St-Zip: ORLANDO, FL 32801 US

Title: P/D
Name: MILTON, V, JOHN
Address: 80 WEST LUCERNE CIRCLE
City-St-Zip: ORLANDO, FL 32801 US

Title: S/T
Name: KEITH, HENRY T
Address: 80 WEST LUCERNE CIRCLE
City-St-Zip: ORLANDO, FL 32801 US

I hereby 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 all other like empowered.

SIGNATURE: JAMES F EMERSON

EVP

02/12/2010

Electronic Signature of Signing Officer or Director

Date