

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 13, 2007
Secretary of State

DOCUMENT# N05000010094

Entity Name: PENNING HEALTH & NURSING SUPPORT, INC.**Current Principal Place of Business:**737 CRESTMONT DR
WAYNESVILLE, NC 28786**New Principal Place of Business:****Current Mailing Address:**737 CRESTMONT DR
WAYNESVILLE, NC 28786**New Mailing Address:****FEI Number:** **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**EMAS, JOSEPH I
1224 WASHINGTON AVENUE
MIAMI BEACH, FL 33139 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: P () Delete
Name: POLAK-DALY, INGRID YVONNE
Address: 4170 INVERRARY DRIVE, APT #402
City-St-Zip: LAUDERHILL, FL 33319

Title: VP () Delete
Name: GUMMELS-WESOLICK, PENELOPE JANE
Address: 737 CRESTMONT DRIVE
City-St-Zip: WAYNESVILLE, NC 28786

Title: D () Delete
Name: WALTHER DALY, CLAVEL
Address: 4156 INVERRARY DRIVE APT #307
City-St-Zip: LAUDERHILL, FL 33319

Title: D () Delete
Name: BRANDON, MONICA
Address: INDIRA GANDHI STREET 990,
City-St-Zip: DISTRICT PARA, SA SURINAME SA

Title: D () Delete
Name: DE VRIES, MARIJKE
Address: 165 CATHARINE AVE
City-St-Zip: BRANTFORD, ON N3T 1Y8 CA

Title: D/S () Delete
Name: ABENDANON-BRUIINENDAA, ANNE ROSE
Address: 737 CRESTMONT DR
City-St-Zip: WAYNESVILLE, NC 28786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP/T (X) Change () Addition
Name: GUMMELS-WESOLICK, PENELOPE JANE
Address: 737 CRESTMONT DRIVE
City-St-Zip: WAYNESVILLE, NC 28786

Title: D (X) Change () Addition
Name: DALY, RICHARD
Address: 902-F. S. LIPONA RD
City-St-Zip: TALLAHASSEE, FL 32304

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

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

Title: D/S (X) Change () Addition
Name: ABENDANON-BRUIINENDAA, ANNE ROSE
Address: CONTRABASWEG 18, 1312 JX ALMERE
City-St-Zip: NETHERLANDS, EU 000000

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: INGRID YVONNE POLAK-DALY

P

02/13/2007

Electronic Signature of Signing Officer or Director

Date