

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000009472

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** MYRTLE'S RETIREMENT HOME, INC.

**Current Principal Place of Business:**

50 NW 184TH TERRACE  
MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

50 NW 184TH TERRACE  
MIAMI, FL 33169

**New Mailing Address:**

**FEI Number:** 27-0992233

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SUCKIE, MYRTLE  
50 NW 184TH TERRACE  
MIAMI, FL 33169 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: SUCKIE, MYRTLE  
Address: 50 NW 184TH TERRACE  
City-St-Zip: MIAMI, FL 33169

Title: D  
Name: WILLIAMS, JOAN  
Address: 601 NW 183RD TERRACE  
City-St-Zip: MIAMI, FL 33169

Title: D  
Name: RUSSELL, NADEEN  
Address: 60 NW 184TH TERRACE  
City-St-Zip: MIAMI, FL 33169

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:** MYRTLE SUCKIE

**DIRE**

**03/30/2010**

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date