

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jun 19, 2012
Secretary of State**

DOCUMENT# N10000007324

Entity Name: ABILITIES AT MORNINGSIDE II, INC.**Current Principal Place of Business:**2735 WHITNEY RD
CLEARWATER, FL 33760**New Principal Place of Business:****Current Mailing Address:**2735 WHITNEY RD
CLEARWATER, FL 33760**New Mailing Address:****FEI Number:** 27-3201131**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**THOMAS, GENE
2735 WHITNEY RD
CLEARWATER, FL 33760 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: CD
Name: BERSOFF, MARILYN
Address: 2735 WHITNEY RD
City-St-Zip: CLEARWATER, FL 33760

Title: VD
Name: BOOKER, JULIAN
Address: 2735 WHITNEY RD
City-St-Zip: CLEARWATER, FL 33760

Title: D
Name: BRUGGEMAN, JOHN
Address: 2735 WHITNEY RD
City-St-Zip: CLEARWATER, FL 33760

Title: D
Name: HARLES, CHARLES
Address: 2735 WHITNEY RD
City-St-Zip: CLEARWATER, FL 33760

Title: D
Name: VAN LOWE, RHONDA
Address: 2735 WHITNEY ROAD
City-St-Zip: CLEARWATER, FL 33760

Title: D
Name: WOOLSEY, PATRICIA
Address: 2735 WHITNEY ROAD
City-St-Zip: CLEARWATER, FL 33760

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: GENE THOMAS

VP

06/19/2012

Electronic Signature of Signing Officer or Director

Date