2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2012
Secretary of State

DOCUMENT# N11000003878

Entity Name: ASHTON MEADOWS HEALTH CARE CENTER INC

Current Principal Place of Business:

7760 NW 50 STREET
UNIT 305
LAUDERHILL, FL 33351

New Principal Place of Business:

Current Mailing Address:

7760 NW 50 STREET
UNIT 305
LAUDERHILL, FL 33351

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:

ROSS, ALLEN O
7760 NW 50 STREET
UNIT 305
LAUDERHILL, FL 33351 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
Name: ROSS, ALLEN O
Address: 7760 NW 50 STREET UNIT 305
City-St-Zip: LAUDERHILL, FL 33351

Title: P
Name: ROSS, KESHIA
Address: 7760 NW 50 STREET UNIT 305
City-St-Zip: LAUDERHILL, FL 33351

Title: VP
Name: WALLEN, SHAMEIKA
Address: 7760 NW 50 STREET UNIT 305
City-St-Zip: LAUDERHILL, FL 33351

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: ALLEN O. ROSS P 04/21/2012

Electronic Signature of Signing Officer or Director — Date