2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010069

FILED Mar 21, 2012 Secretary of State

Entity Name: GILD ADULT FAMILY SERVICES CORP.

Current Principal Place of Business: New Principal Place of Business:

18539 SW 133RD AVENUE 18539 SW 133RD AVENUE MIAMI, FL 331774206 MIAMI, FL 331774206 US

Current Mailing Address: New Mailing Address:

18539 SW 133RD AVENUE 18539 SW 133RD AVENUE MIAMI, FL 331774206 US

FEI Number: 45-3684208 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DESSALINES, MARIE L 18539 SW 133RD AVENUE MIAMI, FL 331774206 US

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: DP

 Name:
 DESSALINES, MARIE L

 Address:
 18539 SW 133RD AVENUE

 City-St-Zip:
 MIAMI, FL 331774206

Title: DP

 Name:
 DESSALINES, GESTON

 Address:
 18539 SW 133RD AVENUE

 City-St-Zip:
 MIAMI, FL 331774206

Title:

Name: BEAUVAIS, FRANCOISE
Address: 16520 SW 105TH COURT

City-St-Zip: MIAMI, FL 33157

Title: SD

 Name:
 FILS-AIME, RONALD

 Address:
 17064 SW 109 COURT

 City-St-Zip:
 MIAMI LAKES, FL 33157

Title: D

Name: PARAISON, ANNIE
Address: 2607 JENKINS STREET
City-St-Zip: NASHVILLE, TN 3728

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: GESTON DESSALINES VP 03/21/2012