

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

DOCUMENT# N17038

**FILED**  
**Apr 23, 2010**  
**Secretary of State**

**Entity Name:** SENIORS FIRST, INC.

**Current Principal Place of Business:**

5395 LB MCLEOD  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

5395 LB MCLEOD  
ORLANDO, FL 32811

**New Mailing Address:**

**FEI Number:** 59-2759603

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CASORIA, EDWARD  
2153 LEE ROAD  
WINTER PARK, FL 32789 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:** C  
**Name:** ROYAL, GEORGE  
**Address:** 1560 ORANGE AVE, STE. 750  
**City-St-Zip:** WINTER PARK, FL 32789

**Title:** T  
**Name:** GAY, JOHN  
**Address:** 221 N.E IVANHOE BLVD, #330  
**City-St-Zip:** ORLANDO, FL 32804

**Title:** S  
**Name:** HAGE, MICHELLE  
**Address:** 2855 HAWTHORNE ST  
**City-St-Zip:** ORLANDO, FL 32806

**Title:** VC  
**Name:** KASSAB, JERRY  
**Address:** 1159 BRANTLEY ESTATES DRIVE  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32714

**Title:** VC  
**Name:** HIGGINS, ROBERT  
**Address:** 215 NORTH EOLA DRIVE  
**City-St-Zip:** ORLANDO, FL 32802

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:** HARLENE REID

DF

04/23/2010

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

\_\_\_\_\_  
Date