

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jun 16, 2012**  
**Secretary of State**

DOCUMENT# N19727

**Entity Name:** COLUMBIAN HOME OF LAKE PLACID, INC.**Current Principal Place of Business:**102 WASHINGTON BLVD  
LAKE PLACID, FL 33852 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 1081  
LAKE PLACID, FL 33862 US**New Mailing Address:****FEI Number:** 65-0500224**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SHEEHAN, J. TIMOTHY  
300 DAL HALL BLVD.  
LAKE PLACID, FL 33852 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: GONSALVES, GORDON R  
Address: 221 MOONGLOW AVENUE  
City-St-Zip: LAKE PLACID, FL 33852

Title: VP  
Name: HOGAN, PATRICK  
Address: 13 HILLCREST STREET  
City-St-Zip: LAKE PLACID, FL 33852

Title: S/T  
Name: DENT, HUGH G III  
Address: 222 HILLSIDE DRIVE  
City-St-Zip: LAKE PLACID, FL 33852

Title: D  
Name: O'SHEA, JOHN J  
Address: 1022 ASTER STREET  
City-St-Zip: LAKE PLACID, FL 33852

Title: D  
Name: DOLAN, SEAN A  
Address: 616 FLAMINGO ROAD, NE  
City-St-Zip: LAKE PLACID, FL 33852

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: HUGH G DENT III

S/T

06/16/2012

Electronic Signature of Signing Officer or Director

Date