2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20792

FILED Jun 08, 2007 Secretary of State

Entity Name: MIAMI VOA ELDERLY HOUSING, INC.

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

11495 W. FLAGLER STREET 1201 HAYS STREET

MIAMI, FL 33174 US TALLAHASSEE, FL 323012525 US

Current Mailing Address: New Mailing Address:

VOA NATIONAL SERVICES 1660 DUKE ST ALEXANDRIA, VA 223143427 US

FEI Number: 58-1777367 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition
Name: HOLMAN, RUSSELL MD Name: HOLMAN, RUSSELL MD
Address: 716 STALEY COURT Address: 10901 ENCHANTED HOLLOW WAY

City-St-Zip: RALEIGH, NC 276096361 City-St-Zip: RALEIGH, NC 27614

Title: P () Delete Title: P (X) Change () Addition Name: GOULD, CHARLES Name: DALE, KAREN

 Address:
 1660 DUKE ST.
 Address:
 1660 DUKE ST.

 City-St-Zip:
 ALEXANDRIA, VA 223143427
 City-St-Zip:
 ALEXANDRIA, VA 223143427

Title: ST () Delete Title: ST (X) Change () Addition Name: PATTERSON, RON Name: BOWMAN, DAVID

 Address:
 1660 DUKE ST.
 Address:
 1660 DUKE ST.

 City-St-Zip:
 ALEXANDRIA, VA 22314
 City-St-Zip:
 ALEXANDRIA, VA 22314

Title: D () Delete Title: D (X) Change () Addition
Name: SPILANE, MICHAEL DR. Name: HOLDER, GERARD

 Name:
 SPILANE, MICHAEL DR.
 Name:
 HOLDER, GERARD

 Address:
 640 JACKSON ST
 Address:
 1250 I ST NW, SUITE 901

 City-St-Zip:
 SAINT PAUL, MN 55101
 City-St-Zip:
 WASHINGTON, DC 20005

Title: D () Delete Title: D (X) Change () Addition Name: MOORE, CAROL Name: LUBARSKY, JOSEPH M

 Name:
 MOORE, CAROL
 Name:
 LUBARSKY, JOSEPH M

 Address:
 6031 GROVE DRIVE
 Address:
 600 FOXGATE ROAD

 City-St-Zip:
 ALEXANDRIA, VA 22307
 City-St-Zip:
 LOUISVILLE, KY 40223

Title: D () Delete Title: () Change () Addition

 Name:
 KNIGHT, GEORGE
 Name:

 Address:
 2181 JAMIESON AVE # 1003
 Address:

 City-St-Zip:
 ALEXANDRIA, VA 22314
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID T. BOWMAN ST 06/08/2007