

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30108

FILED
Apr 25, 2007
Secretary of State

Entity Name: MCCLOUD'S ADULT LIVING FACILITY, INC.

Current Principal Place of Business:

140 ASTOR AVENUE
QUINCY, FL 32352

New Principal Place of Business:

Current Mailing Address:

140 ASTOR AVENUE
QUINCY, FL 32352

New Mailing Address:

FEI Number: 59-2923861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCCLOUD, RONALD L
108 ASTOR AVE
QUINCY, FL 32351 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: PD () Delete
Name: MCCLOUD, RONALD L
Address: 108 ASHTOR AVE
City-St-Zip: QUINCY, FL 32351

Title: VP () Delete
Name: MCCLOUD, ROSETTA
Address: 140 ASTOR AVE
City-St-Zip: QUINCY, FL 32351

Title: S () Delete
Name: MCCLOUD, JAUNCE M
Address: 108 ASTOR AVE
City-St-Zip: QUINCY, FL 32351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCCLOUD, RONALD L
Address: 108 ASTOR AVE
City-St-Zip: QUINCY, FL 32351

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: RONALD MCCLOUD

PD

04/25/2007

Electronic Signature of Signing Officer or Director

Date