

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36530

FILED
Feb 12, 2007
Secretary of State

Entity Name: CENTER FOR GERONTOLOGY, INC.

Current Principal Place of Business:

1001 WEST CYPRESS CREEK BLVD., #320K
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 24384
FORT LAUDERDALE, FL 33307 US

New Mailing Address:

FEI Number: 65-0191347

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRANG, SAMUEL B III
2110 N.E. 30TH STREET
FT. LAUDERDALE, FL 33306 US

Name and Address of New Registered Agent:

STRANG, SAMUEL B III
1001 W. CYPRESS CREEK RD., #320K
FT. LAUDERDALE, FL 33309 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:

02/12/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STRANG, SAMUEL III
Address: 2110 NE 30TH ST
City-St-Zip: FT. LAUDERDALE, FL 33306

Title: D () Delete
Name: MACKINALY, ROBERT MS
Address: P.O. BOX 24384
City-St-Zip: FT. LAUDERDALE, FL 33307

Title: D () Delete
Name: BOWERS, KATHY BSW
Address: 2110 NE 30TH ST
City-St-Zip: FT. LAUDERDALE, FL 33306

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STRANG, SAMUEL III
Address: 1001 W. CYPRESS CREEK RD., #320K
City-St-Zip: FT. LAUDERDALE, FL 33309

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 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: SAMUEL B. STRANG, III

PRES

02/12/2007

Electronic Signature of Signing Officer or Director

Date