2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2012
Secretary of State

DOCUMENT# N95000002103

Entity Name: ALVIN A. DUBIN ALZHEIMER'S RESOURCE CENTER, INC.

Current Principal Place of Business:

10051 MCGREGOR BLVD.
SUITE 101
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

10051 MCGREGOR BLVD.
SUITE 101
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 65-0580633 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWANK, BRITTON G
3783 SEAGO LANE
FORT MYERS, FL 33901 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: TD
Name: O'DONNELL, ALBERT
Address: 4291 WILLIAMS ROAD
City-St-Zip: ESTERO, FL 33928

Title: D
Name: OSTERHOUT, CAROL
Address: 1268/1 CREEKSIDE LANE
City-St-Zip: FORT MYERS, FL 33913

Title: VPD
Name: SENECA, JAMIE
Address: 1482 ALCAZAR AVE
City-St-Zip: FORT MYERS, FL 33901

Title: D
Name: SWANK, BRITTON
Address: 3783 SEAGO LANE
City-St-Zip: FORT MYERS, FL 33901

Title: CEO
Name: STEPHAN, VICTORIA B
Address: 10051 MCGREGOR BLVD., SUITE 101
City-St-Zip: FORT MYERS, FL 33919

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: VICTORIA STEPHAN CEO 04/18/2012

Electronic Signature of Signing Officer or Director Date