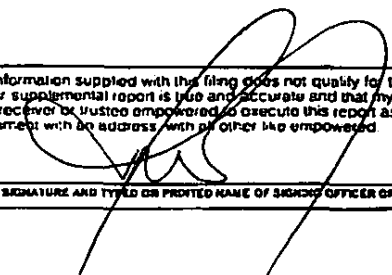


FILED
Aug 15, 2008 8:00 am
Secretary of State

08-15-2008 90002 008 ****70.00

2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N97000006725 1. Entity Name HERITAGE MANOR OF MEMORIAL PARK, INC.			
Principal Place of Business 100 SOUTH PINE ISLAND ROAD SUITE 134 PLANTATION, FL 33324		Mailing Address 100 SOUTH PINE ISLAND ROAD SUITE 134 PLANTATION, FL 33324	
2. Principal Place of Business - No P.O. Box # 1471 SW 26th Avenue Suite, Apt. #, etc 7A		3. Mailing Address 2925 PGA Boulevard Suite, Apt. #, etc. 200	
City & State Boynton Beach, FL		City & State Palm Beach Gardens, FL	
Zip 33426	Country US	Zip 33410	Country US
4. FEI Number 65-0801315		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent BLATTNER, DAVID K 100 S. PINE ISLAND ROAD SUITE 134 PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Edward M. Ricci, Esq. - RICCI-LEOPOLD Street Address (P.O. Box Number is Not Acceptable) 2925 PGA Boulevard, #200 City Palm Beach Gardens FL Zip Code 33410	
8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Edward M. Ricci  July 30, 2008 Signature typed or printed name of registered agent and the applicable DATE			
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST MICHAEL, KATHLEEN I 1471 S.W. 26TH AVENUE BOYNTON BEACH, FL 43426 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Kathleen I. Michael 1417 S.W. 26th Avenue, #7A Boynton Beach, FL 33426 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MICHAEL, THEODORE J JR. 5830 SNOWSHOE CIRCLE BLOOMFIELD HILLS, MI 483014303 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STRONG, SANDRA L 1717 N. FEDERAL HWY. DELRAY BEACH, FL 33403 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with or other like empowered.			
SIGNATURE: 		Theodore J. Michael, Jr. 07/30/08 248 723-9250 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #	