2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000062561

City-St-Zip:

MIAMI, FL 33157

Entity Name: COLONIAL DRIVE SENIOR RESIDENCE CARE, INC.

FILED Jan 14, 2009 Secretary of State

Current Pri	ncipal Place	of Business:	New Principal Place of	New Principal Place of Business:	
10220 S.W. MIAMI, FL	164TH STRE 33157	ET			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
10220 S.W. MIAMI, FL 3	164TH STRE 33157	ET			
FEI Number:	65-1019439	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
GOVEA, OI 13210 S.W. MIAMI, FL	55TH STREE	T			
The above in the State		ubmits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	E:				
	Electron	ic Signature of Registered Age	ent	Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	ST () GOVEA, ODALY 13210 S.W. 551		Title: (Name: Address:) Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ODALYS GOVEA PRES 01/14/2009