

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000056336

FILED  
Jan 29, 2006  
Secretary of State

**Entity Name:** THE GARDENS AT MARGATE ALF INC.

**Current Principal Place of Business:**

6700 NW 21 ST  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

6700 NW 21 ST  
MARGATE, FL 33063

**New Mailing Address:**

**FEI Number:** 65-1108489

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JOHNSTON, NANCY  
6700 NW 21ST STREET  
MARGATE, FL 33063 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: JOHNSTON, NANCY  
Address: 6700 NW 21 ST  
City-St-Zip: MARGATE, FL 33063

Title: T ( ) Delete  
Name: JOHNSTON, ANDREW  
Address: 6700 NW 21ST STREET  
City-St-Zip: MARGATE, FL 33063

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

**SIGNATURE:** NANCY JOHNSTON

P

01/29/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date