

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000093920

FILED
Jan 12, 2011
Secretary of State

Entity Name: GOLDEN COVE ASSISTED LIVING FACILITY, INC.

Current Principal Place of Business:

918 EGAN DRIVE
ORLANDO, FL 328226018

New Principal Place of Business:

Current Mailing Address:

918 EGAN DRIVE
ORLANDO, FL 328226018

New Mailing Address:

FEI Number: 59-3752814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRECIL, YOLETTE
918 EGAN DRIVE
ORLANDO, FL 328226018 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: PSTD
Name: PRECIL, YOLETTE
Address: 918 EGAN DRIVE
City-St-Zip: ORLANDO, FL 328226018

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

SIGNATURE: YOLETTE PRECIL

PRES

01/12/2011

Electronic Signature of Signing Officer or Director

Date