2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000050762

Entity Name: FOUR SEASONS ALF, INC.

FILED Mar 05, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5080 WAYSIDE DR 2432 BREEZY MEADOW ROAD

SANFORD, FL 32771 APOPKA, FL 32712

Current Mailing Address: New Mailing Address:

5080 WAYSIDE DR 2432 BREEZY MEADOW ROAD

SANFORD, FL 32771 APOPKA, FL 32712

FEI Number: 02-0597154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CARLOS, CARVIZ
5080 WAYSIDE DR

CARLOS, CARVIZ
2432 BREEZY MEADOW ROAD

5080 WAYSIDE DR 2432 BREEZY MEADOW ROAD SANFORD, FL 32771 US APOPKA, FL 32712 US

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: CARVIZ CARLOS 03/05/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 CARLOS, CARVIZ
 Name:
 CARLOS, CARVIZ

 Address:
 5080 WAYSIDE DR
 Address:
 2432 BREEZY MEADOW ROAD

City-St-Zip: SANFORD, FL 32771 City-St-Zip: APOPKA, FL 32712

Title: STD () Delete Title: STD (X) Change () Addition

Name: CARLOS, JOYCELYN Name: CARLOS, JOCELYN

Address: 5080 WAYSIDE DR Address: 2432 BREEZY MEADOW ROAD

City-St-Zip: SANFORD, FL 32771 City-St-Zip: APOPKA, FL 32712

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: CARVIZ CARLOS PD 03/05/2008