2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000124695

Entity Name: LAKEVIEW MANOR ASSISTED LIVING FACILITY, INC.

FILED Jun 26, 2006 Secretary of State

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

5357 BROSCHE RD ORLANDO, FL 32807

Current Mailing Address: New Mailing Address:

5357 BROSCHE RD ORLANDO, FL 32807

FEI Number: 42-1587692 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:

CASTILLO, FERNANDO L
5357 BROSCHE RD
5357 BROSCHE RD
ORLANDO, FL 32807 US
APOSTOL, JESUS
5357 BROSCHE RD
ORLANDO, FL 32807 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: JESUS APOSTOL 06/26/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 $\label{eq:title:PD} \mbox{Title:} \qquad \mbox{PD} \qquad \mbox{(X) Change () Addition}$

 Name:
 CASTILLO, FERNANDO
 Name:
 APOSTOL, JESUS

 Address:
 3357 BROSHE RD
 Address:
 3357 BROSHE RD

 City-St-Zip:
 ORLANDO, FL 32807
 City-St-Zip:
 ORLANDO, FL 32807

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

 Name:
 CASTILLO, MARILYN
 Name:
 APOSTOL, ESTERLITA

 Address:
 5357 BROSHE ROAD
 Address:
 5357 BROSHE ROAD

 City-St-Zip:
 ORLANDO, FL 32807
 City-St-Zip:
 ORLANDO, FL 32807

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

 Name:
 SAPINOSO, ROSANO
 Name:

 Address:
 150-07 7TH AVE
 Address:

 City-St-Zip:
 WHITESTONE, NY 11357
 City-St-Zip:

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

 Name:
 FLORO, HONORIA
 Name:

 Address:
 150-07 7TH AVE
 Address:

 City-St-Zip:
 WHITESTONE, NY 11357
 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: JESUS APOSTOL P 06/26/2006