2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 26, 2004
Secretary of State

DOCUMENT# P03000019969

Entity Name: GARY'S ADULT LIVING FACILITY, INC.

Current Principal Place of Business:

3361 N.W. 208TH TERRACE
MIAMI, FL 33056

New Principal Place of Business:

Current Mailing Address:

3361 N.W. 208TH TERRACE
MIAMI, FL 33056

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARU, TORRANCE
3361 N.W. 208TH TERRACE
MIAMI, FL 33056

Name and Address of New Registered Agent:

GARY, TORRANCE
3361 N.W. 208TH TERRACE
MIAMI, FL 33056

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: TORRNACE GARY 05/26/2004
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:

Title: D ( ) Delete
Name: GARY, TORRANCE
Address: 3361 N.W. 208TH TERRACE
City-St-Zip: MIAMI, FL 33056

Title: D ( ) Delete
Name: GARY, ANN
Address: 3361 N.W. 208TH TERRACE
City-St-Zip: MIAMI, FL 33056

Title: D ( ) Delete
Name: SCOTT, TERRY
Address: 3361 N.W. 208TH TERRACE
City-St-Zip: MIAMI, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 Section 119.07(3)(i), 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: TORRANCE GARY D 05/26/2004
Electronic Signature of Signing Officer or Director Date