

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000021367

FILED
Apr 30, 2012
Secretary of State

Entity Name: ANGEL'S CARE RETIREMENT RESORT, INC

Current Principal Place of Business:

6767 CLARCONA-OCOEE RD
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

6767 CLARCONA-OCOEE RD
ORLANDO, FL 32810

New Mailing Address:

FEI Number: 41-2080434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ST. HUBERT JEAN, KISLENE
7043 HENNEPIN BLVD
ORLANDO, FL 32818 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: P
Name: ST HUBERT JEAN, KISLENE
Address: 6767 CLARCONA OCOEE RD
City-St-Zip: ORLANDO, FL 32810

Title: VP
Name: JEAN, BERTHOT
Address: 6767 CLARCONA OCOEE RD
City-St-Zip: ORLANDO, FL 32810

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: KISLENE ST HUBERT JEAN

P

04/30/2012

Electronic Signature of Signing Officer or Director

_____ Date