

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2005 8:00 am
Secretary of State

03-23-2005 90025 026 ***150.00

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1. Entity Name

LOVE & AFFECTIONATE ALF INC



Principal Place of Business

311 SW 77 TERRACE
NORTH LAUDERDALE, FL 33068

Mailing Address

311 SW 77 TERRACE
NORTH LAUDERDALE, FL 33068



03102005 No Chg-P CR2E034 (10/03)

4. FEI Number

56-2427430

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GREGG, CAROL

~~10001 FOX GLEN DRIVE~~
~~BOCA RATON, FL 33428~~

3310 NW 103RD AVENUE
SUNRISE, FL 33351

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Carol Gregg
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3/10/05

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	GREGG, CAROL
STREET ADDRESS	10001 FOX GLEN DR 3310 NW 103RD AVE
CITY- ST -ZIP	BOCA RATON, FL 33028 SUNRISE, FL 33351

TITLE	
NAME	
STREET ADDRESS	
CITY- ST -ZIP	

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NAME	
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CITY- ST -ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Carol Gregg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

3/10/05 954-309-7361