

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000116835

Entity Name: MORNINGSIDEN CENTER, INC.

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

C/O JAMES L. CASE  
2810 EAST OAKLAND PARK BLVD., SUITE 102  
FORT LAUDERDALE, FL 33306

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JAMES L. CASE  
2810 EAST OAKLAND PARK BLVD., SUITE 102  
FORT LAUDERDALE, FL 33306

**New Mailing Address:**

FEI Number: 33-1073129

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CASE, JAMES L  
2810 EAST OAKLAND PARK BLVD., SUITE 102  
FORT LAUDERDALE, FL 33306 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: PSTD  
Name: CASE, JAMES L  
Address: 2810 EAST OAKLAND PARK BLVD., SUITE 102  
City-St-Zip: FORT LAUDERDALE, FL 33306

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: JAMES L. CASE

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02/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date