2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2012
Secretary of State

DOCUMENT# P03000127957

Entity Name: ELDERCARE FALL CENTERS OF FLORIDA, INC.

Current Principal Place of Business:

1250 E. HALLANDALE BCH BLVD
SUITE 806
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

2385 NW EXECUTIVE CENTER DRIVE
SUITE 100
BOCA RATON, FL 33431

Current Mailing Address:

P.O. BOX 68
SPRING LAKE, NJ 07762

New Mailing Address:

2517 STATE ROUTE 35
J203
MANASQUAN, NJ 08736

FEI Number: 20-0537215 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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: PRES
Name: SCHWARTZ, DAVID C PH.D.
Address: 12385 NW EXECUTIVE CENTER DRIVE, SUITE 100
City-St-Zip: BOCA RATON, FL 33431

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: JULIE SALVI SVP 04/27/2012

Electronic Signature of Signing Officer or Director Date