

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000001702

FILED  
Jun 16, 2005  
Secretary of State

Entity Name: ELDERLY HOUSING INVESTMENT CORPORATION

**Current Principal Place of Business:**

5130 COMMERCIAL DRIVE  
SUITE H  
MELBOURNE, FL 32940

**New Principal Place of Business:**

**Current Mailing Address:**

5130 COMMERCIAL DRIVE  
SUITE H  
MELBOURNE, FL 32940

**New Mailing Address:**

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

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

NEWTON, JOHN E  
2201 REDWOOD DRIVE  
MELBOURNE BEACH, FL 32951 US

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

NEWTON, JOHN E  
5130 COMMERCIAL DR  
SUITE H  
MELBOURNE, FL 32940 US

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: \_\_\_\_\_ 06/16/2005  
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: P ( ) Delete  
Name: NEWTON, JOHN E  
Address: 2201 REDWOOD DRIVE  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: S ( ) Delete  
Name: MCGOVERN, THOMAS J  
Address: P.O. BOX 361854  
City-St-Zip: MELBOURNE, FL 32936

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: NEWTON, JOHN E  
Address: 5130 COMMERCIAL DR SUITE H  
City-St-Zip: MELBOURNE, FL 32940

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: JOHN E NEWTON P 06/16/2005  
Electronic Signature of Signing Officer or Director Date