

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000054045

FILED
Mar 13, 2006
Secretary of State

Entity Name: ASSISTED LIVING OF PINELLAS INC

Current Principal Place of Business:

6409 10TH ST N
ST PETERSBURG, FL 33702 US

New Principal Place of Business:

Current Mailing Address:

6409 10TH ST N
ST PETERSBURG, FL 33702 US

New Mailing Address:

1119 MEADOW LAWN DRIVE NORTH
ST PETERSBURG, FL 33702 US

FEI Number: 20-0919487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BILANOVIC, MIRJANA
6409 10TH ST N
ST PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

BILANOVIC, MIRJANA PD
1119 MEADOW LAWN DRIVE NORTH
ST PETERSBURG, FL 33702 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: BILANOVIC MIRJANA

03/13/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BILANOVIC, MIRJANA
Address: 6409 10TH ST N
City-St-Zip: ST PETERSBURG, FL 33702 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BILANOVIC, MIRJANA
Address: 1119 MEADOW LAWN DRIVE NORTH
City-St-Zip: ST PETERSBURG, FL 33702 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BILANOVIC MIRJANA

PD

03/13/2006

Electronic Signature of Signing Officer or Director

Date