

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158664

Entity Name: NANCY'S ADULT FAMILY CARE, INC.

FILED  
Apr 29, 2005  
Secretary of State

**Current Principal Place of Business:**

7600 NW 12TH CT  
PLANTATION, FL 33322

**New Principal Place of Business:**

**Current Mailing Address:**

7600 NW 12TH CT  
PLANTATION, FL 33322

**New Mailing Address:**

FEI Number: 05-0614220

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PITTER, CARL S  
7435 NW 57TH ST  
TAMARAC, FL 33319 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTSD ( ) Delete  
Name: SMITH-SIMPSON, NANETTE A  
Address: 7600 NW 12TH CT  
City-St-Zip: PLANTATION, FL 33322

Title: VPD ( ) Delete  
Name: SIMPSON, ROHAN C  
Address: 7600 NW 12TH CT  
City-St-Zip: PLANTATION, FL 33322

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

Title: PTSD (X) Change ( ) Addition  
Name: SMITH-SIMPSON, NANNETTE A  
Address: 7600 NW 12TH CT  
City-St-Zip: PLANTATION, FL 33322

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: NANNETTE A. SMITH-SIMPSON

PRES

04/29/2005

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

\_\_\_\_\_  
Date