2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000033682

Entity Name: MARION COUNTY ADULT TRANSPORT, INC.

FILED Feb 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

HAMPTON MANOR

1410 S.E. 16TH AVE

OCALA, FL 34471 US

HAMPTON MANOR

1731 SW 2ND AVE SUITE C

OCALA, FL 34474 US

Current Mailing Address: New Mailing Address:

HAMPTON ADMINISTRATION
P.O. BOX 76509
PO BOX 771019
SAINT PETERSBURG, FL 33734 US
PART OF BOX 771019
OCALA, FL 34477 US

FEI Number: 20-2428709 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KAUFFMAN, JAY E 6526 CENTRAL AVENUE ST. PETERSBURG, FL 33710 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition Name: JOHNSEN, PEDER L Address: 7770 NW 76TH PLACE Title: PTD (X) Change () Addition Name: JOHNSEN, PEDER L Address: 3220 SE 20TH AVE

 Address:
 7770 NW 76TH PLACE
 Address:
 3220 SE 20TH AVE

 City-St-Zip:
 OCALA, FL 34482 US
 City-St-Zip:
 OCALA, FL 34471 US

Title: () Delete Title: SEC () Change (X) Addition
Name: JOHNSEN, BARBARA J SEC

 Address:
 Address:
 42 SE 62ND AVE

 City-St-Zip:
 City-St-Zip:
 OCALA, FL 34472

I hereby certify that the information supplied with this filing does not qualify 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: PEDER JOHNSEN PTD 02/28/2008