

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000094968

FILED  
Jan 08, 2009  
Secretary of State

Entity Name: WINDSOR LAKESIDE CARE VILLAGE INCORPORATED

## Current Principal Place of Business:

248 TRAFALGAR WAY  
LAKE PLACID, FL 33852

## New Principal Place of Business:

232 TRAFALGAR WAY  
LAKE PLACID, FL 33852

## Current Mailing Address:

5571 MARQUESAS CIRCLE  
SARASOTA, FL 34233

## New Mailing Address:

7826 SADDLE CREEK TRAIL  
SARASOTA, FL 34241

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HARRIS, GARY P VP  
5571 MARQUESAS CIRCLE  
SARASOTA, FL 34233 US

## Name and Address of New Registered Agent:

DONATO, EVELYN  
7826 SADDLE CREEK TRAIL  
SARASOTA, FL 34241 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: EVELYN DONATO

01/08/2009

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: PRES ( ) Delete  
Name: HOUGHTON, GEORGE  
Address: 5571 MARQUESAS CIRCLE  
City-St-Zip: SARASOTA, FL 34233

Title: VP ( ) Delete  
Name: HARRIS, GARY P  
Address: 5571 MARQUESAS CIRCLE  
City-St-Zip: SARASOTA, FL 34233

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: HOUGHTON, GEORGE  
Address: 7832 SADDLE CREEK TRAIL  
City-St-Zip: SARASOTA, FL 34241

Title: VP (X) Change ( ) Addition  
Name: HOUGHTON, GARY  
Address: 7826 SADDLE CREEK TRAIL  
City-St-Zip: SARASOTA, FL 34241

Title: DIR ( ) Change (X) Addition  
Name: NICHOLSON, CHRISTIAN  
Address: 7826 SADDLE CREEK TRAIL  
City-St-Zip: SARASOTA, FL 34241

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: GEORGE HOUGHTON

P

01/08/2009

Electronic Signature of Signing Officer or Director

Date