

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000022782

FILED
Apr 20, 2011
Secretary of State

Entity Name: OHANA ADULT FAMILY CARE HOME, INC.

Current Principal Place of Business:

817 SW SAIL TERRACE
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

817 SW SAIL TERRACE
PORT ST. LUCIE, FL 34953

New Mailing Address:

FEI Number: 74-3162439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA INCORPORATORS, INC.
8875 HIDDEN RIVER PKWY STE 300
TAMPA, FL 33637 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

OFFICERS AND DIRECTORS:

Title: D,P
Name: ACEVEDO, MELANIE J
Address: 817 SW SAIL TERRACE
City-St-Zip: PORT ST. LUCIE, FL 34953

I hereby 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 all other like empowered.

SIGNATURE: MELANIE J. ACEVEDO

D,P

04/20/2011

Electronic Signature of Signing Officer or Director

Date