

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000063075

FILED
May 01, 2012
Secretary of State

Entity Name: GLENCOE'S HAVEN ADULT FAMILY CARE HOME, INC.

Current Principal Place of Business:

2555 GLENCOE FARMS RD
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

P O BOX 1374
EDGEWATER, FL 32132

New Mailing Address:

FEI Number: 20-4876765

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAEDO-COLLINS, TERESITA
2555 GLENCOE FARMS RD
NEW SMYRNA BEACH, FL 32168 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
Name: CAEDO-COLLINS, TERESITA
Address: P O BOX 1374
City-St-Zip: EDGEATER, FL 32132

Title: D
Name: COLLINS, PARRY K
Address: P.O. BOX 1374
City-St-Zip: EDGEWATER, FL 32132

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: TERESITA COLLINS

PRES

05/01/2012

Electronic Signature of Signing Officer or Director

Date