

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000072179

FILED
Jul 17, 2008
Secretary of State

Entity Name: BRAYBROOK ASSISTED LIVING, INC.

Current Principal Place of Business:

7211 BEACON WOODS DRIVE
HUDSON, FL 34667 US

New Principal Place of Business:

4930 BAY PARK DRIVE
PORT RICHEY, FL 34668 US

Current Mailing Address:

7211 BEACON WOODS DRIVE
HUDSON, FL 34667 US

New Mailing Address:

4930 BAY PARK DRIVE
PORT RICHEY, FL 34668 US

FEI Number: 20-8064741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, EUNICE
6636 HARBOR DRIVE
HUDSON, FL 34667 US

Name and Address of New Registered Agent:

SULLIVAN, EUNICE
4930 BAY PARK DRIVE
PORT RICHEY, FL 34668 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: EUNICE SULLIVAN

07/17/2008

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: P () Delete
Name: SULLIVAN, EUNICE
Address: 6636 HARBOR DRIVE
City-St-Zip: HUDSON, FL 34667 US

Title: VP () Delete
Name: SULLIVAN, PATRICK
Address: 6636 HARBOR DRIVE
City-St-Zip: HUDSON, FL 34667 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: SULLIVAN, EUNICE
Address: 4930 BAY PARK DRIVE
City-St-Zip: PORT RICHEY, FL 34668 US

Title: VP (X) Change () Addition
Name: WALKER, JODY
Address: 7532 SR 52
City-St-Zip: HUDSON, FL 34667

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: EUNICE SULLIVAN

PRES

07/17/2008

Electronic Signature of Signing Officer or Director

Date