2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 18, 2007
Secretary of State

DOCUMENT# P06000084257

Entity Name: AMERY ASSISTED LIVING INC.

Current Principal Place of Business:

2635 SW 46TH ST
CAPE CORAL, FL 33990

New Principal Place of Business:

1425 DEL PRADO BLVD S
SUITE #5
CAPE CORAL, FL 33990

Current Mailing Address:

2635 SW 46TH ST
CAPE CORAL, FL 33990

New Mailing Address:

1425 DEL PRADO BLVD S
SUITE #5
CAPE CORAL, FL 33990

FEI Number: 20-5081758 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PETITHOMME, YVES
2635 SW 46TH ST
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

HENERY, LIVIO
1425 DEL PRADO BLVD S
SUITE #5
CAPE CORAL, FL 33990 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: PETITHOMME YVES 09/18/2007
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: DIR ( ) Delete
Name: PETITHOMME, YVES
Address: 2635 SW 46TH ST
City-St-Zip: CAPE CORAL, FL 33914

Title: P ( ) Delete
Name: LOUIS, ROSIE
Address: 2635 SW 46TH ST
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LIVIO, HENERY
Address: 1425 DEL PRADO BLVD S
City-St-Zip: CAPE CORAL, FL 22990

Title: ST (X) Change ( ) Addition
Name: BUCKLEY, LIVIO
Address: 1425 DEL PRADO BLVD S
City-St-Zip: CAPE CORAL, FL 33990

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: LIVIO HENERY P 09/18/2007
Electronic Signature of Signing Officer or Director Date