

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000090338

FILED
May 06, 2008
Secretary of State

Entity Name: ST AUBYN SENIOR SERVICES INC

Current Principal Place of Business:

4161 SW TUMBLE ST
PORT ST LUCIE, FL 34953 US

New Principal Place of Business:

Current Mailing Address:

4161 SW TUMBLE ST
PORT ST LUCIE, FL 34953 US

New Mailing Address:

FEI Number: 20-5184085

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, ORRIN S
2272 SW PLYMOUTH ST
PORT ST LUCIE, FL 34953 US

Name and Address of New Registered Agent:

WILLIAMS, ORRIN S
2272 SW PANTHER TRACE
STUART, FL 34997 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:

05/06/2008

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: WILLIAMS, ORRIN S
Address: 2272 SW PLYMOUTH ST
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: VP () Delete
Name: WILLIAMS, DENIESE M
Address: 2272 SW PLYMOUTH ST
City-St-Zip: PORT ST LUCIE, FL 34953 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILLIAMS, ORRIN S
Address: 2272 SW PANTHER TRACE
City-St-Zip: STUART, FL 34997 US

Title: VP (X) Change () Addition
Name: WILLIAMS, DENIESE M
Address: 2272 SW PANTHER TRACE
City-St-Zip: STUART, FL 34997 US

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: DENIESE WILLIAMS

VP

05/06/2008

Electronic Signature of Signing Officer or Director

Date