

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000155708

Entity Name: LAURELWOOD CARE, INC

FILED
Feb 27, 2007
Secretary of State

Current Principal Place of Business:

1903 MERCER AVE
LEHIGH ACRES, FL 33972

New Principal Place of Business:

Current Mailing Address:

1903 MERCER AVE
LEHIGH ACRES, FL 33972

New Mailing Address:

FEI Number: 20-8092955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STEINER, SHAWN M
121 COOLIDGE AVE
LEHIGH ACRES, FL 33939 US

Name and Address of New Registered Agent:

STEINER, SHAWN M
121 COOLIDGE AVE
LEHIGH ACRES, FL 33936 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: SHAWN STEINER

02/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEINER, SHAWN M
Address: 121 COOLIDGE AVE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VP () Delete
Name: SADDLAR, CHERISE S
Address: 1417 IRONDALE ST
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SHAWN STEINER

P

02/27/2007

Electronic Signature of Signing Officer or Director

Date