## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000100550

Address:

City-St-Zip:

5757 66TH STREET N

ST. PETERSBURG, FL 33709 US

Entity Name: SENIORS CHOICE DIRECTORY, INC.

FILED Sep 09, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
13575 58TH STREET SUITE 170 CLEARWATER, FL				
Current Mailing Address:		New Mailing Address:		
13575 58TH STREE SUITE 170 CLEARWATER, FL				
FEI Number: 26-085892	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address	of Current Registered Agent	: Name and Address o	of New Registered Agent:	
LAW OFFICES OF D 100 S. EDISON AVE STE. A TAMPA, FL 33606 U	DARRIN T. MISH, P.A. JS			
The above named er in the State of Florida		he purpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				
	etronic Signature of Registered		Date	
	7.193(2)(b), F.S., the corporation di ncing Trust Fund Contribution (  ).	d not receive the prior notice.		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Address: 5757 66TH	() Delete , ROBERT J H STREET N RSBURG, FL 33709 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Address: 5757 66Th	() Delete , ROBERT J H STREET N RSBURG, FL 33709 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Address: 5757 66Th	() Delete , ROBERT J I STREET N RSBURG, FL 33709 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: T	( ) Delete	Title:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ROBERT J WISEMAN PRES 09/09/2008