

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000010854

**FILED**  
**May 04, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA ADULT & COMMUNITY ENRICHMENT SERVICES, INC.

**Current Principal Place of Business:**

3119 CORAL WAY  
SUITE 200  
MIAMI, FL 33145

**New Principal Place of Business:**

3050 HORSESHOE DRIVE NORTH  
SUITE 197  
NAPLES, FL 34104

**Current Mailing Address:**

3119 CORAL WAY  
SUITE 200  
MIAMI, FL 33145

**New Mailing Address:**

3050 HORSESHOE DRIVE NORTH  
SUITE 197  
NAPLES, FL 34104

**FEI Number:** 11-3834955

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PADRON, FELIX O  
3119 CORAL WAY  
SUITE 200  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

PADRON, FELIX O  
3050 HORSESHOE DRIVE NORTH  
SUITE 197  
NAPLES, FL 34104 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: \_\_\_\_\_

05/04/2010

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  
Name: PADRON, FELIX O  
Address: 3050 HORSESHOE DRIVE NORTH, SUITE 197  
City-St-Zip: NAPLES, FL 34104

I hereby 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 all other like empowered.

SIGNATURE: FELIX O. PADRON

P

05/04/2010

Electronic Signature of Signing Officer or Director

Date