

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000031470

FILED  
Apr 30, 2010  
Secretary of State

Entity Name: AMERICAN SENIOR CARE INC.

**Current Principal Place of Business:**

494 MAPLE AVE.  
FORT PIERCE, FL 34982

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 2491  
FORT PIERCE, FL 34954

**New Mailing Address:**

FEI Number: 33-1209001

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

JOSEPH, ROSEMARY  
1515 SAN DIEGO AVE  
FORT PIERCE, FL 34946 US

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

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JOSEPH, ROSEMARY  
Address: 1515 SAN DIEGO AVE  
City-St-Zip: FORT PIERCE, FL 34946 US

Title: VP  
Name: BROWN, RASHAWNDA R  
Address: 1515 SAN DIEGO AVE  
City-St-Zip: FORT PIERCE, FL 34946 US

Title: SEC  
Name: JONES, DAN JR  
Address: 1515 SAN DIEGO AVE  
City-St-Zip: FORT PIERCE, FL 34946 US

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: ROSEMARY JOSEPH

PRES

04/30/2010

Electronic Signature of Signing Officer or Director

Date