## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000046380

FILED May 01, 2009 Secretary of State

Entity Name: J AND J WEST BOCA HEALTH CARE CENTER, INC.

Current Principal Place of Business:			New Principa	New Principal Place of Business:		
STE 200/30	8TH STREET 00 ON, FL 33428	3				
Current Mailing Address:			New Mailing	New Mailing Address:		
STE 417	IGRESS AVE EACH, FL 334	145				
FEI Number:	80-0184276	FEI Number Applied For ( )	FEI Number Not Applicab	le ( ) Certificate of Status Desired	d ( )	
Name and	Address of C	urrent Registered Agent:	Name and Ad	Name and Address of New Registered Agent:		
STE 417	JOEL IGRESS AVE EACH, FL 334	145 US				
	named entity s of Florida.	ubmits this statement for the p	ourpose of changing its re	egistered office or registered agent,	or both,	
SIGNATUF	RE:					
	Electron	c Signature of Registered Age	ent	Date		
		(2)(b), F.S., the corporation did no	ot receive the prior notice.			
Election Campaign Financing Trust Fund Contribution ().  OFFICERS AND DIRECTORS:			ADDITIONS/C	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ROSEN, R JOEI	SS AVE STE 417	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	STANGER, JÈFI	SS AVE STE 417	Title: Name: Address: City-St-Zip:	()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.

SIGNATURE: JEFFREY L STANGER D 05/01/2009