

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000002597

FILED
Apr 06, 2011
Secretary of State

Entity Name: MEMORABLE CARE FACILITY CORP.

Current Principal Place of Business:

17646 WASHINGTON STREET
WINTER GARDEN, FL 34787

New Principal Place of Business:

16623 ROYAL PALM DRIVE
GROVELAND, FL 34736

Current Mailing Address:

16623 ROYAL PALM DRIVE
GROVELAND, FL 34736

New Mailing Address:

FEI Number: 27-1621785 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BROWN, CHERYL
16623 ROYAL PALM DRIVE
GROVELAND, FL 34736 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

OFFICERS AND DIRECTORS:

Title: P
Name: BROWN, CHERYL A
Address: 16623 ROYAL PALM DRIVE
City-St-Zip: GROVELAND, FL 34736

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: CHERYL BROWN

PRES

04/06/2011

Electronic Signature of Signing Officer or Director

Date