

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000077790

**FILED**  
**Jun 17, 2011**  
**Secretary of State**

**Entity Name:** RESIDENTIAL EXPERT IN ASSISTED LIVING INC.

**Current Principal Place of Business:**

9174 SILVER GLEN WAY  
LAKEWORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

9174 SILVER GLEN WAY  
LAKEWORTH, FL 33467

**New Mailing Address:**

**FEI Number:** 27-3540030

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HERNANDEZ, JESSICA  
17535 SYCAMORE DRIVE  
WEST PALM BEACH, FL 33470 US

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

HERNANDEZ, JESSICA  
17535 W. SYCAMORE DRIVE  
WEST PALM BEACH, FL 33470 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:**

Electronic Signature of Registered Agent

06/17/2011

Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** SIMMS, LAURISTON  
**Address:** 9174 SILVER GLEN WAY  
**City-St-Zip:** LAKEWORTH, FL 33467 US

**Title:** SEC  
**Name:** HERNANDEZ, JESSICA  
**Address:** 17535 W. SYCAMORE DRIVE  
**City-St-Zip:** WEST PALM BEACH, FL 33470

**Title:** VP  
**Name:** CLARKE, MONICA  
**Address:** 14983 DRAFTHORSE DRIVE  
**City-St-Zip:** WELLINGTON, FL 33414 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:** JESSICA HERNANDEZ

SEC

06/17/2011

Electronic Signature of Signing Officer or Director

Date