2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34377

Entity Name: CENTURION RESIDENCE SERVICES, INC.

FILED Mar 26, 2009 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:		
1601 FORUM PLACE, STE P-2 WEST PALM BEACH, FL 33401					1601 FORUM PLACE 307 WEST PALM BEACH, FL 33401		
Current Mailing Address:					New Mailing Address:		
1601 FORUM PLACE, STE P-2 WEST PALM BEACH, FL 33401					1601 FORUM PLACE 307 WEST PALM BEACH, FL 33401		
FEI Number	: 65-0261002	FEI Num	ber Applied For()	FEI Nur	nber Not Appl	licable ()	Certificate of Status Desired ()
Name and	l Address of (Current Re	egistered Agent:		Name and	Address of I	New Registered Agent:
1601 FOR WEST PAI The above	N, RICHARD F UM PLACE, P LM BEACH, Fl anamed entity of Florida.	-2 L 33401	US is statement for the p	ourpose c	of changing i	ts registered o	office or registered agent, or botl
SIGNATU							
Electronic Signature of Registered Agent					 Date		
Election Car	mpaign Financin	g Trust Fun	d Contribution ().				
OFFICERS	S AND DIREC	TORS:			ADDITION	IS/CHANGES	TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	CEO (KOCH, WILLIA 1601 FORUM F WEST PALM B	PLACE, P-2			Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S (CALLAHAN, RI 1601 FORUM F WEST PALM B	PLACE, P-2			Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TD (SHIPLEY, ZAC 1601 FORUM F WEST PALM B	PLACE, P-2			Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	P (REINACHER, S 1601 FORUM F WEST PALM B	PLACE SUIT			Title: Name: Address: City-St-Zip:	ROWE, KAREI 1601 FORUM	() Change()Addition N PLACE SUITE 307 BEACH, FL 33401
Title: Name: Address: City-St-Zip:	VP (CURLEY, MAR 339 WEST BA' OSTERVILLE,	Y RD			Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	VP (ELROY, JAME: 318 INDIAN TR				Title: Name: Address:	AVP (X ELROY, JAME 318 INDIAN TR	

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.

City-St-Zip:

FORT LAUDERDALE, FL 33326

SIGNATURE: RICHARD P. CALLAHAN S 03/26/2009

FORT LAUDERDALE, FL 33326

City-St-Zip: