2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000011354

Entity Name: AFFORDABLE/CITRUS GLEN

1637 E VINE ST STEE

KISSIMMEE, FL

Address: City-St-Zip: FILED Apr 29, 2008 Secretary of State

Entity Name: AFFORDABLE/CITRUS GLEN, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1637 E VIN SUITE E KISSIMMEI	E ST E, FL 34744	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1637 E VIN SUITE E KISSIMME,		US			
FEI Number:	59-3203041	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US			DIXON, KENNETH 1637 E VINE STREET SUITE E KISSIMMEE, FL 3474	1637 E VINE STREET	
The above in the State		submits this statement for the pu	rpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: KENNETH DIXON				04/29/2008	
Electronic Signature of Registered Agent			nt	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DIXON, KENNI	NE STREET SUITE E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SAKOL, EMILY	NE STREET SUITE E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VST (DIXON, KENNI) Delete ETHG	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: KENNETH DIXON P 04/29/2008