

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000063170

Entity Name: GUARDIAN ADULT CARE HOME, INC.

FILED
Jan 28, 2005
Secretary of State

Current Principal Place of Business:

431 E AIRPORT BLVD
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

431 E AIRPORT BLVD
SANFORD, FL 32773

New Mailing Address:

FEI Number: 59-3256682

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUDER, LOWELL
431 E AIRPORT BLVD
SANFORD, FL 32773 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTC () Delete
Name: BAUDER, LOWELL K.
Address: 431 E AIRPORT BLVD
City-St-Zip: SANFORD, FL

Title: VD () Delete
Name: BAUDER, THERESA C
Address: 431 E. AIRPORT BLVD
City-St-Zip: SANFORD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LOWELL BAUDER

P

01/28/2005

Electronic Signature of Signing Officer or Director

Date