

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000038680

FILED
Jan 31, 2008
Secretary of State

Entity Name: TWINS SENIORS RESIDENCE ACLF, INC.

Current Principal Place of Business:

11334 SOUTHWEST 2ND ST.
SWEETWATER, FL 33174 US

New Principal Place of Business:

Current Mailing Address:

11334 SOUTHWEST 2ND ST.
SWEETWATER, FL 33174 US

New Mailing Address:

FEI Number: 65-0492224 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GONZALEZ, GERMAN JR
3455 S.W. 142ND PLACE
MIAMI, FL 33175 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: PD () Delete
Name: GONZALEZ, GERMAN JR
Address: 3455 S.W. 142ND PL.
City-St-Zip: MIAMI, FL 33175

Title: VM () Delete
Name: GONZALEZ, SARA Z
Address: 3455 SW 142 NO PLACE
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: GONZALEZ, SARA Z
Address: 3455 SW 142 NO PLACE
City-St-Zip: MIAMI, FL 33175

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.

SIGNATURE: SARA ZELDA GONZALEZ

VP

01/31/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date