2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006
Secretary of State

DOCUMENT# P96000039627

Entity Name: AUTUMN VILLAGE, INC.

Current Principal Place of Business:

1103 BARRS STREET
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

3610 SHAWNEE SHORES DRIVE
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 59-3380417 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAHAM, ALCIRA E MS.
3610 SHAWNEE SHORES DRIVE
JACKSONVILLE, FL 32225 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: D ( ) Delete
Name: GRAHAM, ALCIRA E
Address: 1103 BARRS STREET
City-St-Zip: JACKSONVILLE, FL 32205

Title: V ( ) Delete
Name: CANO, DANIEL
Address: 3610 SHAWNEE SHORES DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: T ( ) Delete
Name: CARPENTER, ALEXANDRA
Address: 10010 SKINNER LAKE DR
City-St-Zip: JACKSONVILLE, FL 32246

Title: S ( ) Delete
Name: CANO, LUIS F
Address: 3317 PLUM STREET
City-St-Zip: JACKSONVILLE, FL 32205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: ALCIRA E GRAHAM P 04/13/2006

Electronic Signature of Signing Officer or Director — Date