

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000041481

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** THE MANORS APARTMENTS, INC.

**Current Principal Place of Business:**

965 MANOR DRIVE #6A  
PALM SPRINGS, FL 33461

**New Principal Place of Business:**

**Current Mailing Address:**

965 MANOR DRIVE  
STE 6  
PALM SPRINGS, FL 33461 US

**New Mailing Address:**

**FEI Number:** 65-0681836      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROSEN, PAUL  
905 MANOR DRIVE  
SUITE 6  
PALM SPRINGS, FL 33461 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ROSEN, PAUL  
Address: 965 MANOR DRIVE, STE 6  
City-St-Zip: PALM SPRINGS, FL 33461

Title: V  
Name: ROSEN, HARRY  
Address: 200 EAST BROWARD BLVD, 17 FLOOR  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: ST  
Name: ROSEN, RON  
Address: 4000 HOLLYWOOD CIR #7825 SO.  
City-St-Zip: HOLLYWOOD, FL

I hereby 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 all other like empowered.

SIGNATURE: PAUL H ROSEN

PRES

03/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date