

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000053067

FILED
Dec 13, 2008
Secretary of State

Entity Name: SENIOR LIFE COMMUNICATIONS GROUP, INC.

Current Principal Place of Business:

1515 N. FEDERAL HIGHWAY
SUITE 300
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

1515 N. FEDERAL HIGHWAY
SUITE 300
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 65-0725333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINLEY, CHANDLER R
1645 PALM BEACH LAKES BLVD.
SUITE 520
WEST PALM BEACH, FL 33401 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: D () Delete
Name: FINLEY, ANITA
Address: 3 BEACHWAY, NORTH
City-St-Zip: OCEAN RIDGE, FL 33435

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: FINLEY, ANITA
Address: 3 BEACHWAY, NORTH
City-St-Zip: OCEAN RIDGE, FL 33435

Title: VICE () Change (X) Addition
Name: FINLEY, WILLIAM E VICE PR
Address: 3 BEACHWAY NORTH
City-St-Zip: OCEAN RIDGE, FL 33435 US

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: ANITA R FINLEY

D/PR

12/13/2008

Electronic Signature of Signing Officer or Director

Date