

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2003 8:00 am
Secretary of State

01-14-2003 90050 015 ***150.00

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1. Entity Name
ROSEWOOD MANOR OF VERO BEACH, INC.

Principal Place of Business
**3710 14TH STREET
VERO BEACH FL 32960**

Mailing Address
~~PO BOX 3710 14TH ST
VERO BEACH FL 32960~~



2. Principal Place of Business

3. Mailing Address
3710 14th St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

City & State
Vero Beach, FL

4. FEI Number
59-3441169

Applied For
 Not Applicable

Zip

Country

Zip
32960

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FUNNELL, SCOTT R
1251 BARBER STREET
SEBASTIAN FL 32958**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
NAME **PD RENO, THOMAS M**
STREET ADDRESS ~~1385 20TH AVE~~
CITY-ST-ZIP **VERO BEACH FL 32960**

TITLE Change Addition
NAME
STREET ADDRESS **1340 POITRAS DR.**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE Delete
NAME **VPD FUNNELL, SCOTT R**
STREET ADDRESS **1251 BARBER STEET**
CITY-ST-ZIP **SEBASTIAN FL 32958**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME **STD FUNNELL, ROBERT L**
STREET ADDRESS **4685 69TH ST.**
CITY-ST-ZIP **VERO BEACH FL 32967**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME **AST ST. PIERRE, BERNARD C**
STREET ADDRESS **1940 SAND DOLLAR LN.**
CITY-ST-ZIP **VERO BEACH FL 32963**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Thomas M. RENO* **THOMAS M. RENO** **RENO** **01/10/03** **772-492-4119**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)