

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000101185

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Entity Name:** LOVE 'N' CARE ASSISTED LIVING FACILITY, INC.

**Current Principal Place of Business:**

5426 18TH ST. WEST  
BRADENTON, FL 34207

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 10738  
BRADENTON, FL 34282

**New Mailing Address:**

FEI Number: 65-0715765

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAMPBELL, SANDRA  
LOVE 'N' CARE ASSISTED LIVING FACILITY  
5426 18TH ST. WEST  
BRADENTON, FL 34207 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: PRES  
Name: CAMPBELL, SANDRA  
Address: 5426 18TH ST. WEST  
City-St-Zip: BRADENTON, FL 34207

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: SANDRA CAMPBELL, PRESIDENT

PRES

04/13/2012

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

\_\_\_\_\_ Date