

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000000690

FILED  
Jan 13, 2009  
Secretary of State

Entity Name: SENIORCARE ADVISORY GROUP, INC.

## Current Principal Place of Business:

6801 ENERGY COURT  
SUITE 200  
SARASOTA, FL 34240

## New Principal Place of Business:

## Current Mailing Address:

6801 ENERGY COURT  
SUITE 200  
SARASOTA, FL 34240

## New Mailing Address:

FEI Number: 65-0722909

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHEMBRI, JENIFER S  
240 S PINEAPPLE AVE., 10TH FLOOR  
SARASOTA, FL 34236 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: P ( ) Delete  
Name: DANIELS, W. JOSEPH  
Address: 19820 HIAWATHA RD.  
City-St-Zip: ODESSA, FL 33556

Title: VP ( ) Delete  
Name: PLUSH, ALAN C  
Address: 3500 SUNBEAM DR  
City-St-Zip: SARASOTA, FL 34240

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: W. JOSEPH DANIELS

P

01/13/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date