2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# P98000043265

Entity Name: SUNNY HILLS ASSISTED LIVING FACILITY, INC.

Current Principal Place of Business:

3600 COMMERCE CNTR DR
SEBRING, FL 33870

New Principal Place of Business:

3600 COMMERCE CNTR DR
SEBRING, FL 33870 US

Current Mailing Address:

1004 WASHINGTON STREET
HOLLYWOOD, FL 33019

New Mailing Address:

940 N. NORTHLAKE DR.
HOLLYWOOD, FL 33020 US

FEI Number: 65-0834767 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLS, FREDERICK J ESQUIRE
MORRISON,MORRISON & MILLS, P.A.
1200 W. PLATT STREET, SUITE 100
TAMPA, FL 33606 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: DP ( ) Delete
Name: LOWRY, ROBERT P
Address: 1004 WASHINGTON STREET
City-St-Zip: HOLLYWOOD, FL 33019

Title: DVP ( ) Delete
Name: LOWRY, ROBERT L
Address: 11 THUNDERBAY DR
City-St-Zip: GRAY, TN 37615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: LOWRY, ROBERT P ROBERT
Address: 940 N. NORTHLAKE DR
City-St-Zip: HOLLYWOOD, FL 33020

Title: DVP (X) Change ( ) Addition
Name: LOWRY, ROBERT L ROBERT
Address: 500 LENTZ LANDING LN
City-St-Zip: NEBO, NC 28761

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: ROBERT LOWRY P 04/28/2009

Electronic Signature of Signing Officer or Director Date