

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000077808

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: AFFORDABLE ASSISTED LIVING, INC.

## Current Principal Place of Business:

420 CRESCENT CIRCLE  
LAKE PARK, FL 33403

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 12443  
LAKE PARK, FL 33403

## New Mailing Address:

FEI Number: 65-0862707

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAUMER, JEFFERY A  
845 #2 FORESTERIA DRIVE  
LAKE PARK, FL 33403 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: DO ( ) Delete  
Name: BAUMER, JEFFERY A  
Address: 845 #2 FORESTERIA DRIVE  
City-St-Zip: LAKE PARK, FL 33403

Title: O ( ) Delete  
Name: BAUMER, ANTON  
Address: 75 WELLMAN ST  
City-St-Zip: LEWISTON, ME 04240

Title: O (X) Delete  
Name: GERACT, MARIO  
Address: 5355 MENDOZA ST  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: O (X) Delete  
Name: HOLDER, STEVE  
Address: 5004 GIVENS DR  
City-St-Zip: RALEIGH, NC 27616

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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 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: JEFFREY A. BAUMER

DO

04/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date