2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# S10012

Entity Name: AVANTE AT INVERNESS, INC.

Current Principal Place of Business:

304 S. CITRUS AVENUE
INVERNESS, FL 344524706 US

New Principal Place of Business:

304 S. CITRUS AVENUE
INVERNESS, FL 344524753 US

Current Mailing Address:

4000 HOLLYWOOD BLVD
SUITE 540 NORTH
HOLLYWOOD, FL 330216751 US

New Mailing Address:

FEI Number: 65-0234652 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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:	D,T	( ) Delete
Name:	LICHTMAN, HARVEY L	
Address:	4000 HOLLYWOOD BLVD., #540 N	
City-St-Zip:	HOLLYWOOD, FL 33021	
Title:	D,P	( ) Delete
Name:	DICKMANN, DEAN J	
Address:	4000 HOLLYWOOD BLVD., #540 N	
City-St-Zip:	HOLLYWOOD, FL 33021 US	
Title:	S	( ) Delete
Name:	IOANNOU, BILL J	
Address:	4000 HOLLYWOOD BLVD., #540 N	
City-St-Zip:	HOLLYWOOD, FL 33021 US	
Title:	VP	( ) Delete
Name:	PATTERSON, MICHAEL	
Address:	4000 HOLLYWOOD BLVD., #540 N	
City-St-Zip:	HOLLYWOOD, FL 33021 US	

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:	VP	(X) Change ( ) Addition
Name:	MURPHY, KEVIN M	
Address:	4000 HOLLYWOOD BLVD., #540 N	
City-St-Zip:	HOLLYWOOD, FL 33021 US	

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: BILL J. IOANNOU S 04/30/2009

Electronic Signature of Signing Officer or Director Date