

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V31221

FILED  
May 02, 2008  
Secretary of State

Entity Name: SENIOR SERVICE CENTER CORP.

## Current Principal Place of Business:

1525 SW 3RD ST.  
STE 8  
DEERFIELD BEACH, FL 33442

## New Principal Place of Business:

## Current Mailing Address:

1525 NW 3RD ST.  
STE 8  
DEERFIELD BEACH, FL 33442

## New Mailing Address:

FEI Number: 65-0017014      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  
TALLAHASSEE, FL 323012525 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: PASSMAN, HOWARD  
Address: 1525 NW 3RD ST STE 8  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: PS ( ) Delete  
Name: LOTOCKI, CHARLES  
Address: 1525 NW 3RD ST STE 8  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: SKIFF, THOMAS  
Address: 33 N. CENTRAL AVE SUITE 317  
City-St-Zip: MEDFORD, OR 97501

Title: VP (X) Change ( ) Addition  
Name: PITBLADDO, RICHARD  
Address: 33 N. CENTRAL AVE SUITE 317  
City-St-Zip: MEDFORD, OR 97501

Title: VP ( ) Change (X) Addition  
Name: DINSMORE, MARK  
Address: 33 N. CENTRAL AVE SUITE 317  
City-St-Zip: MEDFORD, OR 97501

Title: TREA ( ) Change (X) Addition  
Name: YOST, DAVID  
Address: 33 N. CENTRAL AVE SUITE 317  
City-St-Zip: MEDFORD, OR 97501

Title: SEC ( ) Change (X) Addition  
Name: TAYLOR, NANCY  
Address: 33 N. CENTRAL AVE SUITE 317  
City-St-Zip: MEDFORD, OR 97501

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: DAVID YOST

Electronic Signature of Signing Officer or Director

TREA

05/02/2008

\_\_\_\_\_ Date