

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000144024

Entity Name: JENNY'S ASSISTED LIVING FACILITY, INC.

Current Principal Place of Business:

16116 TAMPA STREET
LUTZ, FL 33548

Current Mailing Address:

16116 TAMPA STREET
LUTZ, FL 33548 US

FEI Number: 20-5992646

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORALES, OSVALDO
16116 TAMPA STREET
LUTZ, FL 33548 US

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

Officer/Director Detail :

Title P
Name MORALES, OSVALDO
Address 16116 TAMPA STREET
City-State-Zip: LUTZ FL 33548

Title VP
Name SEGARRA, JENNY M
Address 16116 TAMPA STREET
City-State-Zip: TAMPA FL 33548

Title TREA
Name MORALES, OSVALDO
Address 16116 TAMPA STREET
City-State-Zip: TAMPA FL 33548

Title SEC
Name SEGARRA, JENNY M
Address 16116 TAMPA STREET
City-State-Zip: TAMPA FL 33548

I hereby 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 all other like empowered.

SIGNATURE: JENNY SEGARRA

VICE-PRESIDENT

04/29/2013

Electronic Signature of Signing Officer/Director Detail

Date