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Jan 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 764267 (1) T. Corporation Name WE WHO CARE OF MARION COUNTY, INC.					
Principal Place of Business % RUTH JOHNSON 1507 NE 31ST ST OCALA FL 34479 US			Mailing Address % RUTH JOHNSON 1507 NE 31ST ST OCALA FL 34479 US		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 07/23/1982 4. FEI Number 59-2262041 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent JOHNSON, RUTH 1507 NE 31ST ST OCALA FL 34479				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ Signature, typed or printed name of registered agent and title if applicable.					
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP SD JOHNSON, RUTH 1507 NE 31 ST. Ocala FL TD WHITAKER, SHIRLEY 653 NE 31 ST. Ocala FL D MULLEN, HELEN 10320 SE 25 AVE Ocala FL D PALMER, WAYNE 1834 SE 36 PL. Ocala FL PD SULLIVAN, MADELYN 3503 NE FT KING #125-H Ocala FL VPD GARDNER, LYNDIA 11290 SE 189 CT Ocklawaha FL					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE PD 1.2 NAME Leo Wiechens 1.3 STREET ADDRESS 525 S.E. 18 Street 1.4 CITY-ST-ZIP Ocala, FL 34471 2.1 TITLE D 2.2 NAME Christiana Perkins 2.3 STREET ADDRESS 9 Almond Pass Drive 2.4 CITY-ST-ZIP Ocala, FL 34472 3.1 TITLE D 3.2 NAME Christopher Sandon Wiechens 3.3 STREET ADDRESS 2603 S.E. 17 Street 3.4 CITY-ST-ZIP Ocala, FL 34471 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP					



CR2E037 (10/97)

SIGNATURE:

SIGNATURE REQUIRED
Ruth Johnson

January 14, 1998 (352)629-1903