2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2000 8:00 am
Secretary of State
02-04-2000 90030 031 ****70.00

DOCUMENT # 764267

1. Entity Name

WE WHO CARE OF MARION COUNTY, INC.

Principal Place of Business	Mailing Address
~~7677 SE 41ST CT~~ ~~OCALA FL 34480~~ ~~US~~	~~525 SE 18TH ST~~ ~~OCALA FL 34471-5216~~ ~~US~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
	P. O. Box 9033
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: Ocala, Florida
Zip / Country	Zip: 34479 / Country

4. FEI Number: 59-2262041 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~WIECHENS, LEO A~~ ~~525 SE 18TH ST~~ ~~OCALA FL 34471~~	Name: Ruth Johnson Street Address (P.O. Box Number is Not Acceptable): 1507 N.E. 31 Street Ocala, FL 34479 City: **FL** Zip Code

8. 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: Ruth Johnson

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~SD~~ ~~WALKER, MABEL~~ ~~533 EMERALD ROAD~~ ~~OCALA FL 34472~~	☐ Delete	P/D Gingrich, Charlotte 1441 N.E. 23 Street Ocala, FL 34470	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~TD~~ ~~EVANS, KELLY~~ ~~2036 SE 8TH ST~~ ~~OCALA FL 34471~~	☐ Delete	VP/D Lyons, Frank 5981 S.W. 128 Place Ocala, FL 34473	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ ~~PERKINS, CHRISTIANA~~ ~~9 ALMOND PASS DR~~ ~~OCALA FL 34472~~	☐ Delete	S/D Johnson, Ruth 1507 N.E. 31 Street Ocala, FL 34479	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ ~~PALMER, WAYNE~~ ~~1834 SE 36 PL.~~ ~~OCALA FL~~	☐ Delete	T/D Whitaker, Shirley 653 N.E. 31 Street Ocala, FL 34479	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~PD~~ ~~WIECHENS, LEO~~ ~~525 SE 18TH ST~~ ~~OCALA FL 34471~~	☐ Delete	D Mullen, Helen 10320 S.E. 25 Avenue Ocala, FL 34480	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ ~~WIECHENS, CHRISTOPHER SA~~ ~~2603 SE 17TH ST~~ ~~OCALA FL 34471~~	☐ Delete	D Fischkelta, Frank 3115 S.W. 89 Place Ocala, FL 34476	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ruth Johnson SIGNATURE REQUIRED Ruth Johnson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #