

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90034 019 ****61.25

DOCUMENT # 768486

1. Entity Name
DEDICATED ALTERNATIVE RESOURCES FOR THE ELDERLY,

Principal Place of Business
 2215 NW 21ST PLACE
 GAINESVILLE FL 32605
 US

Mailing Address
 2215 NW 21ST PLACE
 GAINESVILLE FL 32605
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 2215 NW 2nd Avenue
 Suite, Apt. #, etc.

3. Mailing Address
 2215 NW 2nd Avenue
 Suite, Apt. #, etc.

City & State
 Gainesville, FL

City & State
 Gainesville, FL

4. FEI Number **59-2342080**

Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

Zip **32603** Country **USA**

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6. Name and Address of Current Registered Agent
EPPE, MARGARET C
 2215 NW 21ST PLACE
 GAINESVILLE FL 32605

Richard Mitchell
 2215 NW 2nd Avenue
 Gainesville, FL 32603

7. Name and Address of New Registered Agent
 Name **Richard Mitchell**
 Street Address (P.O. Box Number is Not Acceptable)
2215 NW 2nd Avenue
 City **Gainesville, FL** Zip Code **32605**

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 *Richard Mitchell* DATE **3/19/01**

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

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	VD JONES, JESSE R 612 NE 10TH PLACE GAINESVILLE FL 32601	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Richard Mitchell 2215 NW 2nd Avenue Gainesville, FL 32603
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MERING, OTTO V 818 NW 21ST STREET GAINESVILLE FL 32603	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Margaret Eppes 2215 NW 21st Place Gainesville, FL 32605
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JOHNSON, LEE 3841 N.W. 33RD PLACE GAINESVILLE FL 32608	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Melody Marshall 1935 NW 22nd St. Gainesville, FL 32605
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ELLIS, HELEN C 4041 NW 12 AVE GAINESVILLE FL 32605	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Helen Ellis 4041 NW 12th Avenue Gainesville, FL 32605
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EPPE, MARGARET C 2215 NW 21 PLACE GAINESVILLE FL 32605	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LAFRENTZ, DEAN 2908 NW 10TH PLACE GAINESVILLE FL 32605	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: *Richard Mitchell* DATE **3/19/01** (352) 955-6568

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/00)