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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N12268

1. Corporation Name

VOLUNTEERS IN SERVICE TO THE ELDERLY, INC.

Principal Place of Business

853 S NEW YORK AVE LAKELAND FL 33815 US

Mailing Address

853 S NEW YORK AVE LAKELAND FL 33815 US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

11/21/1985

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-2625297

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARTIN, E SNOW JR 200 LAKE MORTON LAKELAND FL 33801

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

PD MCKNIGHT, JOHN 5414 GLENMORE DR LAKELAND FL 33813

1.1 TITLE 1.2 NAME Adamson, Eric B. 1.3 STREET ADDRESS 146 Woodside Dr. 1.4 CITY-ST-ZIP Lakeland Florida 33813

VD KIRK, EDWARD 460 HOWARD AVE LAKELAND FL 33801

2.1 TITLE 2.2 NAME Hudson, George 2.3 STREET ADDRESS 3524 Craftsman Blvd. 2.4 CITY-ST-ZIP Lakeland Florida 33803

TD FERGUSON, KEN 54 LAKE MORTON DR LAKELAND FL 33801

3.1 TITLE 3.2 NAME Murvin, Richard 3.3 STREET ADDRESS 1238 Brighton Way 3.4 CITY-ST-ZIP Lakeland Florida 33803

MD O'REILLY, ALICE C 620 LAUREL LANE LAKELAND FL 33813

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

SD BLACK, JUANITA 2720 COVENTRY AVENUE LAKELAND FL

5.1 TITLE 5.2 NAME Tinney, Margee 5.3 STREET ADDRESS 2130 Phillips Ave. 5.4 CITY-ST-ZIP Lakeland Florida 33803

DELETED

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]

4-28-99

941-284-0828

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)