

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N29371

FILED
Jan 28, 2003
Secretary of State

Entity Name: ALZHEIMER RESOURCE CENTER OF TALLAHASSEE, INC.

Current Principal Place of Business:

1400 NO MONROE ST
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

P O BOX 3553
TALLAHASSEE, FL 32315

New Mailing Address:

FEI Number: 59-2912649 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCGOUGH, THOMAS J.
C/O 1400 NORTH MONROE STREET
1907 HOOT OWL HILL
TALLAHASSEE, FL 32311 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BENESH, JAN
Address: 428 SUMMERBROOK DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: DP () Delete
Name: POLIVKA-WEST, LUMARI, E
Address: 307 W. PARK AVENUE
City-St-Zip: TALLAHASSEE, FL 32301

Title: V () Delete
Name: BOURGEOIS, MICHELLE PH.D
Address: FSU 302 REGIONAL REHAB CENTER
City-St-Zip: TALLAHASSEE, FL 323061200

Title: DT () Delete
Name: SANDERS, JOE,
Address: 250 E 6TH AVE.
City-St-Zip: TALLAHASSEE, FL 32315

Title: D () Delete
Name: KOHLER, PAT,
Address: 3009 HUNINGTON ST
City-St-Zip: TALLAHASSEE, FL 32312

Title: S () Delete
Name: CAVALLARO, GINNY
Address: 55 KENNEL LANE
City-St-Zip: CRAWFORDVILLE, FL 32327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOURGEOIS, MICHELLE PH.D.
Address: FSU 302 REGIONAL REHAB CENTER
City-St-Zip: TALLAHASSEE, FL 323061200

Title: VP (X) Change () Addition
Name: POLIVKA-WEST, LUMARIE
Address: 307 W. PARK AVENUE
City-St-Zip: TALLAHASSEE, FL 32301

Title: DP (X) Change () Addition
Name: BENESH, JAN
Address: 428 SUMMERBROOK DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: DT (X) Change () Addition
Name: SANDERS, JOE
Address: 250 E 6TH AVE.
City-St-Zip: TALLAHASSEE, FL 32303

Title: D (X) Change () Addition
Name: KOHLER, PATRICIA
Address: 3009 HUNINGTON ST
City-St-Zip: TALLAHASSEE, FL 32312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELLE BOURGEOIS

P

01/28/2003

Electronic Signature of Signing Officer or Director

_____ Date

SHEILA SALYER, BOARD MEMBER
TALLAHASSEE SENIOR CENTER
1400 N. MONROE STREET
TALLAHASSEE, FL 32303

PAT ASHLEY, BOARD MEMBER
125 TARPINE DRIVE
PANACEA, FL 32346

DONNA W. OLSEN, BOARD MEMBER
1645 SHELL POINT ROAD
CRAWFORDVILLE, FL 32327

SARA MICHAELS, BOARD MEMBER
2111 LAKE FOREST DRIVE
TALLAHASSEE, FL 32303

MARCIA JENSEN-WALLER, BOARD MEMBER
EDENBROOK SENIOR LIVING
100 JOHN KNOX ROAD
TALLAHASSEE, FL 32303

JUDITH GREENWALD, BOARD MEMBER
TMH EXTENDED CARE
1609 MEDICAL DRIVE
TALLAHASSEE, FL 32308

RALPH K. HOOK, BOARD MEMBER
346 RUGER COURT
TALLAHASSEE, FL 32312

ANGELA EMANUEL, BOARD MEMBER
2665 TOPAZ WAY
TALLAHASSEE, FL 32309

KAREN CAMPBELL, BOARD MEMBER
1923-B CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

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