

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathison
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 20 AM 10:51

DOCUMENT # P93000087334 (7)

1. Corporation Name

LAKELAND HEALTH CARE CENTER, INC.

Principal Place of Business

Mailing Address

1950 LANDINGS BLVD.
SUITE 101
SARASOTA FL 34231

1950 LANDINGS BLVD.
SUITE 101
SARASOTA FL 34231

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

12/21/1993

3a. Date of Last Report

04/13/1994

4. FIC Number

65-0463780

Applied For

Not Applicable

5. Certificate of Status Created

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. The corporation has liability for intangible tax under S. 195.032,
Florida Statutes

Yes No

2. Principal Place of Business

21 1530 KENNEDY BLVD.

2a. Mailing Address

26 1133 FOURTH ST. NW

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27 SUITE 208

City & State

City & State

23 LAKELAND FL.

28 SARASOTA, FL.

Zip

Country

Zip

Country

24 33809

25

29 34236

30

9. Name and Address of Current Registered Agent

BRADLEY, STEVEN R
1950 LANDINGS BLVD #101
SARASOTA FL 34231

10. Name and Address of New Registered Agent

B1 Name

STEVEN R. BRADLEY

B2 Street Address (P.O. Box Number is Not Acceptable)

1133 FOURTH ST.

B3

SUITE 208

B4 City

SARASOTA

FL

B5 Zip Code

34236

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 this appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

2/6/95

Signature of Agent or person authorized to accept office required

(NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	BRADLEY, STEVEN R	1950 LANDINGS BLVD, STE 101	SARASOTA FL
STD	BRADLEY, SR ROBERT J	1950 LANDINGS BLVD STE 101	SARASOTA FL
V	GLASS, TOM	1530 KENNEDY BLVD	LAKELAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	BRADLEY STEVEN R.	1133 FOURTH ST SUITE 208	SARASOTA, FL 34236	<input checked="" type="checkbox"/>	<input type="checkbox"/>
STD	BRADLEY, SR ROBERT J.	1133 FOURTH ST. SUITE 208	SARASOTA, FL. 34236	<input checked="" type="checkbox"/>	<input type="checkbox"/>
STD	BRADLEY, SR ROBERT J.	1133 FOURTH ST. SUITE 208	SARASOTA, FL. 34236	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	GLASS, CAROL	1530 KENNEDY BLVD	LAKELAND, FL, 33809	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 191.02(1)(b), Florida Statutes. I further certify that the information included 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 in writing. I am an officer or a director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 100, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, on the attachment with an address.

SIGNATURE:

STEVEN R. BRADLEY

2/6/95

813 922 3376

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR