

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000033633 (6)

1. Corporation Name

JUST LIKE HOME, INC.

Principal Place of Business

Mailing Address

501 VILLAGE GREEN PARKWAY
SUITE 6
BRADENTON FL 34209

501 VILLAGE GREEN PARKWAY
SUITE 6
BRADENTON FL 34209

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/04/1994

3a. Date of Last Report

4. FEI Number
65-0568234

Applied For
Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.002,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 3647 Cortez Road W
Suite, Apt. #, etc.

26 3647 Cortez Road W
Suite, Apt. #, etc.

22 City & State
23 Bradenton, FL

27 City & State
28 Bradenton, FL

24 34210
25 USA

29 34210
30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NEAL, A-R
13577 FEATHER SOUND DR.
SUITE 300
CLEARWATER FL 34622

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 607.0602 and 607.1506, 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 607.0605, Florida Statutes.

SIGNATURE

Signature of the current name of registered agent (if not a corporation)

Signature of the new registered agent (signature required when necessary)

(Date)

12. OFFICERS AND DIRECTORS

TITLE President/Director
NAME Betty A. Conard
STREET ADDRESS 501 Village Green Pkwy, #6
CITY ST ZIP Bradenton, FL 34209

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE P/D ☒ Change ☐ Addition

12 NAME
13 STREET ADDRESS 3647 Cortez Road W
14 CITY ST ZIP Bradenton, FL 34210

21 TITLE VP/T ☒ Change ☐ Addition

22 NAME James E. Heenan
23 STREET ADDRESS 3647 Cortez Road W
24 CITY ST ZIP Bradenton, FL 34210

31 TITLE D ☒ Change ☐ Addition

32 NAME Richard T. Conard
33 STREET ADDRESS 3647 Cortez Road W
34 CITY ST ZIP Bradenton, FL 34210

41 TITLE S ☐ Change ☒ Addition

42 NAME Karen Cascaddan
43 STREET ADDRESS 3647 Cortez Road W
44 CITY ST ZIP Bradenton, FL 34210

51 TITLE D ☐ Change ☒ Addition

52 NAME Dr. Thomas Fairchild
53 STREET ADDRESS 2440 Winton Terrace East
54 CITY ST ZIP Fort Worth, TX 76109

61 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.02(3)(b), 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 a registered director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12, 13, 14 of changes, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard T. Conard

4/28/95

813.756.2555