

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000033633

1. Entity Name

JUST LIKE HOME, INC.

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90219 003 ***158.75

Principal Place of Business

3655 CORTEZ RD W
STE 110
BRADENTON FL 34210
US

Mailing Address

3655 CORTEZ RD W
STE 110
BRADENTON FL 34210
US

2. Principal Place of Business

311 Castle Shannon Blvd

3. Mailing Address

311 Castle Shannon Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pittsburgh, PA

City & State

Pittsburgh, PA

Zip

15234

Country

USA

Zip

15234

Country

USA

4. FEI Number

65-0568234

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, CHARLES F III
822 11TH STREET WEST
BRADENTON FL 34205

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
CONARD, BETHL A
3647 CORTEZ RD W STE 110
BRADENTON FL 34210 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEOC
LOHR, ROBERT C
3655 CORTEZ ROAD W., STE. 110
BRADENTON FL 34210 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVP
Conard, Betty
1647 71st Street NW
Braden, FL 34209 ☒ Change ☐ Addition ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/00

412-341-4500

Date

Daytime Phone #

CR2E034 (9/99)