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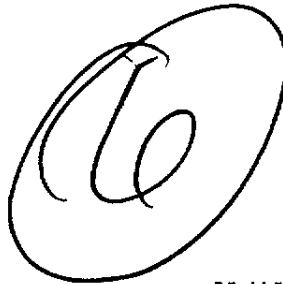
Spe

- 789/740/671 -

- "Life Care Management" -



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08/18/03-01024-011 \*\*96.75

08/18/03-01024-011 \*\*96.25

103-1319  
~~103-26880~~

03 OCT 21 AM 9:16  
NEW YORK STATE  
DIVISION OF CORPORATIONS

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LIFE CARE MANAGEMENT AND DESIGN OF ELDERLY MALE SILHOUET  
(Mark to be Registered)  
FIGURE, ELDERLY FEMALE SILHOUETTE FIGURE HOLDING HANDS, STANDING  
TWO FEMININE CUPPED HANDS.  
The enclosed Trademark/Service Mark Application, specimens and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHERRY DUNN  
(Name of Person)

LIFE CARE MANAGEMENT  
(Firm/Company)

PO Box 60058  
(Address)

SE PETERSBURG FL 33784  
(City/State and Zip Code)

For further information concerning this matter, please call:

SHERRY DUNN at ( 727 ) 526-8516  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

03 OCT 21 AM 9:16  
FL  
STATE  
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

September 10, 2003

SHERRY DUNN  
LIFE CARE MANAGEMENT  
P.O. BOX 60058  
ST. PETERSBURG, FL 33784

SUBJECT: LIFE CARE MANAGEMENT AND DESIGN OF ELDERLY MALE  
SILHOUETTE FIGURE, ELDERLY FEMALE FIGURE HOLDING HANDS,  
STANDING ON TWO FEMININE CUPPED HANDS  
Ref. Number: W03000025880

We have received your document for LIFE CARE MANAGEMENT AND DESIGN OF ELDERLY MALE SILHOUETTE FIGURE, ELDERLY FEMALE FIGURE HOLDING HANDS, STANDING ON TWO FEMININE CUPPED HANDS and your check(s) totaling \$96.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your mark contains word(s)/design(s) that must have a disclaimer. All geographical terms, such as cities, states, countries, and designs of same, must be disclaimed. Some commonly used words and corporate suffixes must also be disclaimed. You must disclaim the following term(s) by completing the disclaimer statement found in #2 of Part III of the application: LIFE CARE MANAGEMENT

We are returning your check for \$87.50. We are using the amount of \$96.25 you had previously submitted with your renewal for the filing fee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6918.

Nanette Causseaux  
Document Specialist Supervisor

Letter Number: 503A00050317

APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK  
PURSUANT TO CHAPTER 495, FLORIDA STATUTES

TO: Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Name & address to whom acknowledgment should be sent:

SHERRY DUNN  
PO Box 60058  
ST PETERSBURG FL 33784

(727) 526-8516  
Daytime Telephone number

PART I

1. (a) Applicant's name: SHERRY L DUNN

(b) Applicant's business address: PO Box 60058

ST PETERSBURG FL 33784  
City/State/Zip

(c) Applicant's telephone number: 727 526-8516

Individual       Corporation       Joint Venture       Other: \_\_\_\_\_  
 General Partnership       Limited Partnership       Union

If other than an individual,

(1) Florida registration number: \_\_\_\_\_ (2) Domicile State: \_\_\_\_\_

(3) Federal Employer Identification Number: \_\_\_\_\_

2. (a) If the mark to be registered is a service mark, the services in connection with which the mark is used:  
(i.e., furniture moving services, diaper services, house painting services, etc.)

CASE MANAGEMENT AND GUARDIANSHIP SERVICES TO THE  
ELDERLY AND DEVELOPMENTALLY DISABLED

(b) If the mark to be registered is a trademark, the goods in connection with which the mark is used:  
(i.e., ladies sportswear, cat food, barbecue grills, shoe laces, etc.)

(c) The mode or manner in which the mark is used:(i.e., labels, decals, newspaper advertisements, brochures, etc.)

BUSINESS CARDS; RETURN ADDRESS STAMP; LETTERHEAD

d) The class(es) in which goods or services fall:

CLASS 42

**PART II**

1. Date first used by the applicant, predecessor, or a related company (must include month, day and year):

(a) Date first used anywhere: 2/4/993 (b) Date first used in Florida: 2/4/1993

**PART III**

1. The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.)

LIFE CARE MANAGEMENT. DESIGN OF ELDERLY MALE  
SILHOUETTE FIGURE, ELDERLY FEMALE FIGURE HOLDING  
HANDS, STANDING ON TWO FEMININE CUPPED HANDS.

English Translation \_\_\_\_\_

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "LIFE CARE  
MANAGEMENT" APART FROM THE MARK AS SHOWN.

I, SHERRY L. DUNN, being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and no other person except a related company has the right to use such mark in Florida either in the identical form or in such near resemblance as to be likely to deceive or confuse or to be mistaken therefor. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct

SHERRY L. DUNN  
Typed or printed name of applicant

[Signature]

Applicant's signature or authorized person's signature  
(List name and title)

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

On this 28 day of Aug, 2003, Sharon L. Dunn personally appeared before me,

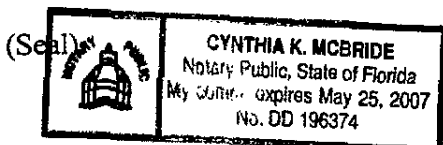
who is personally known to me  whose identity I proved on the basis of FL 20

03 OCT 21 AM 9:26  
STATE OF FLORIDA  
NOTARY PUBLIC  
CYNTHIA K. MCBRIDE

[Signature]

Notary Public Signature

Notary's Printed Name



My Commission Expires: \_\_\_\_\_

FEE: \$87.50 per class



LIFE CARE  
MANAGEMENT™

Sherry L. Dunn

(727) 526-8516

P.O. Box 60058 • St. Petersburg, FL 33784