

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

1995



FILED
SECRETARY OF STATE
OF CORPORATIONS

DOCUMENT # P94000053642 (2)

95 MAY -1 AM 8:35

SHADY OAKS OF ST. PETERSBURG, INC.

2. Date of Incorporation		2a. Mailing Address		3. Date of Incorporation (Qualifies)		3a. Date of Last Report	
21. State of Incorporation		26. Mailing Address		4. FEIN Number		Applied For	
22. State of Incorporation		27. Mailing Address		5. Certificate of Status Desired		Not Applicable	
23. State of Incorporation		28. Mailing Address		6. Election Campaign Financing		\$8.75 Additional Fee Required	
24. State of Incorporation		29. Mailing Address		7. Election Campaign Financing		\$5.00 May Be Added to Fees	
25. State of Incorporation		30. Mailing Address		8. This corporation has liability for interstate tax under 15.110, F.S.		Florida Statutes	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
HAMILTON, KATHLEEN N 1825 JUAREZ WAY S ST PETERSBURG FL 33712		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83. City	
		84. State	
		85. Zip Code	

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is duly organized under the laws of the State of Florida, and is in good standing, and is entitled to do business in the State of Florida, and I hereby accept the appointment as registered agent of said corporation, and accept the responsibility of the Florida Statutes.

12. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation is duly organized under the laws of the State of Florida, and is in good standing, and is entitled to do business in the State of Florida, and I hereby accept the appointment as registered agent of said corporation, and accept the responsibility of the Florida Statutes.

12. ADDITIONAL INFORMATION		13. ADDITIONAL INFORMATION	
NAME		NAME	
ADDRESS		ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
FEDERAL TAX ID NUMBER		FEDERAL TAX ID NUMBER	
BUSINESS PHONE NUMBER		BUSINESS PHONE NUMBER	
HOME PHONE NUMBER		HOME PHONE NUMBER	
FAX NUMBER		FAX NUMBER	
ELECTRONIC MAIL ADDRESS		ELECTRONIC MAIL ADDRESS	
WEB SITE ADDRESS		WEB SITE ADDRESS	
TELEFAX NUMBER		TELEFAX NUMBER	
FEDERAL TAX ID NUMBER		FEDERAL TAX ID NUMBER	
BUSINESS PHONE NUMBER		BUSINESS PHONE NUMBER	
HOME PHONE NUMBER		HOME PHONE NUMBER	
FAX NUMBER		FAX NUMBER	
ELECTRONIC MAIL ADDRESS		ELECTRONIC MAIL ADDRESS	
WEB SITE ADDRESS		WEB SITE ADDRESS	
TELEFAX NUMBER		TELEFAX NUMBER	

REMITTED BY MAY 1

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, and that the undersigned is duly qualified to act as registered agent of the corporation, and that the undersigned shall have the proper legal effect of the filing of this report as required by Chapter 150, Florida Statutes, and that my signature is the same as the signature of the undersigned on the filing of this report.

SIGNATURE: Kathleen N. Hamilton KATHLEEN N HAMILTON 4/28/95 913 8677122