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Feb 06 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **737797** (1)

1. Corporation Name

**CIRCLES OF CARE, INC.**

Principal Place of Business

Mailing Address

**400 EAST SHERIDAN ROAD  
MELBOURNE FL 32901**

**400 EAST SHERIDAN ROAD  
MELBOURNE FL 32901**

3. Date Incorporated or Qualified

**01/11/1977**

4. FEI Number

**59-1101553**

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

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WHITAKER, JAMES B.  
400 EAST SHERIDAN ROAD  
MELBOURNE FL 32901**

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 617.0502 and 617.1508, 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 the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **CD**  
STREET ADDRESS **RICE, PHYLLIS**  
CITY-ST-ZIP **400 EAST SHERIDAN ROAD  
MELBOURNE FL**

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **VD**  
STREET ADDRESS **EVANS, HUGH M JR.**  
CITY-ST-ZIP **400 E SHERIDAN ROAD  
MELBOURNE FL**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **P**  
STREET ADDRESS **WHITAKER, JAMES B.**  
CITY-ST-ZIP **400 E. SHERIDAN ROAD  
MELBOURNE FL**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **VT**  
STREET ADDRESS **FELDMAN, DAVID L.**  
CITY-ST-ZIP **400 E.SHERIDAN ROAD  
MELBOURNE FL**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☒ DELETE  
NAME **S**  
STREET ADDRESS **400 E. SHERIDAN ROAD**  
CITY-ST-ZIP **MELBOURNE FL**

5.1 TITLE ☒ Change ☐ Addition  
5.2 NAME **Corporate Secretary**  
5.3 STREET ADDRESS **Barry L. Hensel, Ph.D.**  
5.4 CITY-ST-ZIP **400 East Sheridan Road  
Melbourne, FL 32901-3184**

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **BRYANT, BETTIE**  
CITY-ST-ZIP **2190 MELALEUCA DR  
MERRITT ISLAND FL**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed/ or on an attachment with a name change.

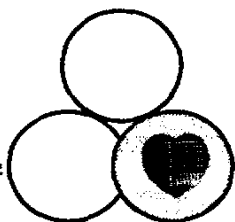
SIGNATURE:

**James B. Whitaker, President**

**1/5/98**

**(407) 984-4900**

CR2E037 (10/97)



# CIRCLES OF CARE INC.

*Your Choice for Quality Mental Health, Alcohol, and Drug Abuse Services*

## BOARD OF DIRECTORS 1 JULY 1997-30 JUNE 1998

### CHAIRMAN

**PHYLLIS RICE**

*Property Manager and Developer  
\*800 Switchgrass Island  
Cocoa, FL 32926  
632-5016 (Fax: 634-5385)*

### VICE CHAIRMAN

**HUGH M. EVANS, JR.**

*President-Broker  
Evans-Butler Realty, Inc.  
\*1688 Hibiscus Boulevard  
Melbourne, FL 32901  
727-1000 (Fax: 984-2890)*

*3175 Knight Oak Court (R)  
Melbourne, FL 32904  
259-3050*

**SEYMOUR BERMAN**

*Retired U.S.A.F.  
207 Rose Drive  
Cocoa Beach, FL 32931  
783-6131*

**BETTIE BRYANT**

*Boeing North American  
\*2190 Melaleuca Drive  
Merritt Island, FL 32952-4025  
799-6937 (O)  
453-7024 (R)*

**ALBERT D. CELIO, Esq.**

*Attorney  
Albert D. Celio, P.A.  
\*Post Office Box 939  
Cocoa, FL 32923-0939  
633-2355 (Fax: 633-2356)*

*Post Office Box 1243 (R)  
Cocoa, FL 32923-1243  
784-2847*

**NORETTA C. D'ALBORA**

*Community Volunteer  
70 Hilltop Lane (R)  
Rockledge, FL 32955  
636-4642*

**ALBERT C. MARTIN**

*Retired V.P. & General Manager  
Rockwell International  
\*Post Office Box 320542  
Cocoa Beach, FL 32932-0542  
784-5712*

**SUE MUNSEY**  
*(Resigned 11/17/97)*

*Kennedy Space Center Congressional  
Support Committee  
2570 Sykes Creek Drive (R)  
Merritt Island, FL 3295  
453-3709*

**WILLIAM B. NUNN, Ed.D.**

*Brevard Community College  
Retired  
\*1375 Gleneagles Way (R)  
Rockledge, FL 32955  
636-1312*

**DEBRA PAVLAKOS**

*Vice President/Relationship Manager  
First Union National Bank  
700 S. Babcock Street, Suite 201  
Melbourne, FL 32901  
984-7407 (Fax 984-3406)*

*448 St. Johns Drive (R)  
Satellite Beach, FL 32937  
773-6235*

**CHARLES J. ROBERTS, Esq.**

*Attorney  
Charles J. Roberts, P.A.  
1678 South Fiske Boulevard  
Rockledge, FL 32955  
638-2002*

*1511 Wall Drive (R)  
Titusville, FL 32780  
268-8034*

**LEO E. ROSELIP**

*Manager, JCPenney Store  
Melbourne Square Mall  
1700 W. New Haven Avenue  
Melbourne, FL 32901  
727-0923 (Fax: 676-1541)*

*\*365 Cherry Drive (R)  
Satellite Beach, FL 32937-3314  
773-2009*