

FILE NOW: FILING FEE IS \$61.25.

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED

98 JUN -5 PM 4:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # N97000005869 (9)

1. Corporation Name

LIFE CARE PASTORAL SERVICES, INC.

Principal Place of Business

Mailing Address

1000 VICAR'S LANDING WAY
PONTE VEDRA BEACH FL 32082

1000 VICAR'S LANDING WAY
PONTE VEDRA BEACH FL 32082

3. Date Incorporated or Qualified

10/17/1997

4. FEI Number

59-3480191

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNSON, RAYMOND M
1000 VICAR'S LANDING WAY
PONTE VEDRA BEACH FL 32082

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 COOPER, JAMES H
STREET ADDRESS 1000 VICAR'S LANDING WAY
CITY - ST - ZIP PONTE VEDRA BEACH FL 32082

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

TITLE ☐ DELETE
NAME JOHNSON, RAYMOND M
STREET ADDRESS 1000 VICAR'S LANDING WAY
CITY - ST - ZIP PONTE VEDRA BEACH FL 32082

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

TITLE ☐ DELETE
NAME TAYLOR, JOSEPH S
STREET ADDRESS 1000 VICAR'S LANDING WAY
CITY - ST - ZIP PONTE VEDRA BEACH FL 32082

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

TITLE ☐ DELETE
NAME ROBERT BORAB
STREET ADDRESS 555 LAKE ROAD
CITY - ST - ZIP PONTE VEDRA BEACH, FL 32082

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

TITLE ☐ DELETE
NAME ROBERT RIEBEL
STREET ADDRESS 7047 LYPRESS BRIDGE DR. SOUTH
CITY - ST - ZIP PONTE VEDRA BEACH, FL 32082

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME JOAN FARRELL
STREET ADDRESS 8134 SEVEN MILE DRIVE
CITY - ST - ZIP PONTE VEDRA BEACH, FL 32082

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 in an attachment with an address.

SIGNATURE

4/28/98

CR2E037 (1097)