FILED

Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90034 010 ***158.75

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300006308

1. Corporation Name

9 TO 3 ADULT DAY SERVICE, INC.

			, <u>.</u>				
Principal Place of Business Mailing Address							â
920 51ST ST. 1		920 51ST ST. W.					•
BRADENTON FL 34209		BRADENTON FL 34209		DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 01/26/1993		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21		26			65-0384531	No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-		5. Certificate of Status Desired	\$8.75	
22		27			5. Certificate of Gladus Desired	Fee Re	equired
City & Stet	0	City & State			6. Election Campaign Financing		May Be
23		28			Trust Fund Contribution	Added 1	to Fees
Zip	Country	Zip	Countr	У	8. This corporation owes the current year In	tangible ☐ Yes	No
24	25	29 30	<u> </u>		Personal Property Tax. 10. Name and Address of New Registered		A 2.140
	9. Name and Address of Current	Registered Agent	8	Name	10. Name and Address of New Registeros	<u>g</u> _	
PEA	rson, robert e						
2704 67TH STREET WEST			82	2 Street A	ddress (P.O. Box Number is Not Acceptable)		
BRADENTON FL 34209				3 / 4	O ST STILL WES.		
			84	City B	<i>RADENTON</i> FL	85 Zip 2	Code 47/19
office or i	registered agent, or both, in the State on the State of the obligation of the obligation of the control of the obligation of the obligatio	of Florida. Such change was auth- ions of, Section 607.0505, Florida	Statute	y the corpor s.	corporation submits this statement for the purpose o ration's board of directors. I hereby accept the appointment of the purpose of the purpo	changing its intment as re	registered gistered
	Signature, typed or printed name of registered agent OFFICERS ANI		13.	ent signature rec	quired when reinstating) ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	ORS IN 12
TITLE	VT OFFICERS AND	DELETE			ADDITIONO/OFFICECO TO OFFICE A	Change	☐ Addition
NAME	PEARSON, ROBERT E	U	1.1 TITLE 1.2 NAME	1		•	}
STREET ADDRESS	ARAL ARTIC ATOPET WEAT			ET ADDRESS	920-57ST STARET WEST		
CITY-ST-ZIP	BRADENTON FL 34209		1.4 CITY-		920-57 STREET WEST BRADENTON FL 34209		į
TITLE	PS	DELETE 2.1 TI				Change	Addition
NAME	PEARSON, JANET P		2.2 NAME		سيعيدان سيد ميدو سدو		}
STREET ADDRESS	2704 67TH STREET WEST		2.3 STRE	ET ADDRESS	920-51 STREET WEST		}
CITY-ST-ZIP	BRADENTON FL 34209		2.4 CITY	ST-ZIP	920-51 ST STREET WEST BRADENTON FL 34209		
TITLE		☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME	Service County 5 for		3.2 NAME	: \			}
STREET ADDRESS		- **	3.3 STRE	ET ADDRESS			į
CITY-ST-ZIP			3.4. CITY-				
TITLE		☐ DELETE	4.1 TITLE		V 7	Change	☐ Addition
NAME			4. 2 NAMI	1			
STREET ADDRESS		ŕ		ET ADDRESS	·		}
C/TY-ST-ZIP		DELETE	4.4 C/TY-			☐ Change	Addition
TITLE		€ DELETE	5.1 TITLE 5.2 NAME		,	□ ⇔iailÿe	L. AUGIDON
NAME			1	ET ADDRESS			}
STREET ADDRESS	1		5.4 CITY-				
CITY OT 71D							

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

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

はいない

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

☐ Addition

☐ Change