

2004 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

04 JAN 27 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 737797	
1. Entity Name CIRCLES OF CARE, INC.	



Principal Place of Business 400 EAST SHERIDAN ROAD MELBOURNE, FL 32901	Mailing Address 400 EAST SHERIDAN ROAD MELBOURNE, FL 32901
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-1101553	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WHITAKER, JAMES B. 400 EAST SHERIDAN ROAD MELBOURNE, FL 32901	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when amending) DATE _____

FILE NOW: FEE IS \$31.25 Initial or Amended UBR	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JACKSON, NEIL M 400 EAST SHERIDAN ROAD MELBOURNE, FL 32901 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 200027873392 01/29/04--01033--015 **70.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MADDEN, JOAN 400 EAST SHERIDAN ROAD MELBOURNE, FL 32901 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WHITAKER, JAMES B. 400 E. SHERIDAN ROAD MELBOURNE, FL 32901 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT FELDMAN, DAVID L. 400 E. SHERIDAN ROAD MELBOURNE, FL 32901 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BARRY L HENSEL, PH.D. 400 E. SHERIDAN ROAD MELBOURNE, FL 32901 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRYANT, BETTIE 2190 MELALEUCA DR MERRITT ISLAND, FL 32952 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jerry Allender, Esq. 118 Country Club Drive Titusville FL 32780 <input checked="" type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James B. Whitaker JAMES B. Whitaker, President & CEO 1/6/2004

CH2E037 (10/02)

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|--|---|
| 7. Name: Berman, Seymour
Address: 207 Rose Drive
City, State, and Zip: Cocoa Beach FL 32931 | Title: Director
Phone: 321/783-6131
Salaried: N |
| 8. Name: Bockman, Sam
Address: 6505 North U.S. 1
City, State, and Zip: Melbourne FL 32940 | Title: Director
Phone: 321/259-5080
Salaried: N |
| 9 Name: D'Albora, Noretta
Address: 9 River Ridge Drive
City, State, and Zip: Rockledge FL 32955 | Title: Director
Phone: 321/636-4642
Salaried: N |
| 10 Name: Evans, Hugh, Jr.
Address:-1682 West-Hibiscus-Boulevard--
City, State and Zip: Melbourne FL 32901 | Title: Director
Phone:-321/727-1000
Salaried: N |
| 11. Name: Forbes, Barry
Address: 1300 Babcock Street
City, State and Zip: Melbourne FL 32901 | Title: Director
Phone: 321/723-7489
Salaried: N |
| 12. Name: Greenwade, Ella
Address: 3225 Birdsong Court
City, State and Zip: Melbourne FL 32934 | Title: Director
Phone: 321/259-8215
Salaried: N |
| 13. Name: Harris, Dewey
Address: 976 Brevard Avenue, Suite A
City, State and Zip: Rockledge FL 32955 | Title: Director
Phone: 321/433-1191
Salaried: N |
| 14. Name: Heshmati, Dr. Heidar
Address: 2575 N. Courtenay Parkway
City, State and Zip: Merritt Island FL 32953 | Title: Director
Phone: 321/454-7111
Salaried: N |
| 15. Name: Jones, Dr. Alice
Address: 2501 D SandTrap Lane
City, State and Zip: Melbourne FL 32935 | Title: Director
Phone: 321/544-3496
Salaried: N |
| 16. Name: Jones-Francey, Darcia
Address: P.O. Box 360843
City, State and Zip: Melbourne FL 32936-0843 | Title: Director
Phone: 321/254-3340
Salaried: N |
| 17. Name: Kambourelis, George
Address: 3343 Cloudberry Place
City, State and Zip: Melbourne FL 32940 | Title: Director
Phone: 321/259-6396
Salaried: N |
| 18. Name: Kenkel, Dr. Mary Beth
Address: 150 West University Boulevard
City, State and Zip: Melbourne Fl 32901 | Title: Director
Phone: 321/674-8142
Salaried: N |

19. Name: Masson, Jack Title: Director
Address: 2725 Judge Fran Jamieson Way Phone: 321/633-2046
City, State and Zip: Viera FL 32940 Salaried: N
20. Name: Pavlakos, Debra Title: Director
Address: 100 South Sykes Creek Parkway Phone: 321/639-5296
City, State and Zip: Merritt Island FL 32952 Salaried: N
21. Name: Rice, Phyllis Title: Director
Address: 100 Riverside Drive, #904 Phone: 321/632-5016
City, State and Zip: Cocoa FL 32922 Salaried: N
22. Name: Roberts, Charles Title: Director
Address: 1241 South Florida Avenue Phone: 321/638-2002
City, State and Zip: Rockledge FL 32955 Salaried: N
23. Name: Salonen, Robert Title: Director
Address: 1698 B West Hibiscus Boulevard Phone: 321/676-3200
City, State and Zip: Melbourne FL 32901 Salaried: N
24. Name: Smith, Dr. Joe Lee Title: Director
Address: 918 Levitt Parkway Phone: 321/636-2166
City, State and Zip: Rockledge FL 32955 Salaried: N
25. Name: Weaver, John Title: Director
Address: 8550 Astronaut Boulevard, USK-012 Phone: 321/861-3544
City, State and Zip: Cape Canaveral FL 32920 Salaried: N
26. Name: Alvarez, Jose Title: Chief of Medical Staff
Address: 400 East Sheridan Road Phone: 321/984-4900
City, State, and Zip: Melbourne FL 32901-3184 Salaried: Yes
27. Name: Baxter, Sharon Title: Director of Nursing
Address: 400 East Sheridan Road Phone: 321/984-4900
City, State, and Zip: Melbourne FL 32901-3184 Salaried: Yes
28. Name: Linda Brannon Title: Human Resources Director
Address: 400 East Sheridan Road Phone: 321/722-5250
City, State, and Zip: Melbourne FL 32901-3184 Salaried: Yes