## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 724973** 

Entity Name: ELDER CARE SERVICES, INC.

**Current Principal Place of Business:** 

2518 W TENNESSEE ST. TALLAHASSEE. FL 32304

**Current Mailing Address:** 

2518 W TENNESSEE ST. TALLAHASSEE. FL 32304 US

FEI Number: 59-1426079 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BALDINO, MARK D 2518 WEST TENNESSEE STREET TALLAHASSEE, FL 32304 US

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.

SIGNATURE: MARK D. BALDINO 02/01/2013

Electronic Signature of Registered Agent

Date

FILED Feb 01, 2013

**Secretary of State** 

CC8029566557

Officer/Director Detail:

Title PCEO Title CD

Name BALDINO, MARK D Name FERRIS, JANET E

Address 2518 W TENNESSEE ST. Address 525 BOBBIN BROOK LANE
City-State-Zip: TALLAHASSEE FL 32304 City-State-Zip: TALLAHASSEE FL 32312

Title V Title VCSD

NameHENDERSON, MICHAELNamePHELAN, WILLIAM JAddress2518 W TENNESSEE ST.Address612 FOREST LAIR

City-State-Zip: TALLAHASSEE FL 32304 City-State-Zip: TALLAHASSEE FL 32312

Title CFOT Title TD

Name JACOBS, DUANE E Name WEEDEN, SHARON

Address 3106 AVON CIRCLE Address 601 NORTH MONROE STREET

City-State-Zip: TALLAHASSEE FL 32312 City-State-Zip: TALLAHASSEE FL 32301

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DUANE E. JACOBS CFO 02/01/2013