

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

FILED
Apr 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 144780 (4)
1. Corporation Name
U & H CARETAKING, INC.



Principal Place of Business Mailing Address
5937 HWY 60 EAST
P.O. BOX 231
LAKE WALES FL 33859-0231
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 68 MAMMOTH GROVE ROAD Suite, Apt. #, etc. 22	2a. Mailing Address 26 P. O. BOX 231 Suite, Apt. #, etc. 27	3. Date Incorporated or Qualified 10/13/1945	4. FEI Number 59-0538925 Applied For Not Applicable
City & State 23 LAKE WALES, FL Zip 24 33853	City & State 28 LAKE WALES, FL Zip 29 33859-0231	5. Certificate of Status Desired 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 8.75 Additional Fee Required \$5.00 May Be Added to Fees Yes No	6. Election Campaign Financing Trust Fund Contribution 7. 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

UPDIKE, LAWRENCE C
HWY 60 EAST
LAKE WALES FL 33853

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
68 MAMMOTH GROVE ROAD
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, 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

TITLE	VD	DELETE
NAME	UPDIKE, SAMUEL D	
STREET ADDRESS	5937 HWY 60 EAST	
CITY-ST-ZIP	LAKE WALES, FL 00000	
TITLE	PD	DELETE
NAME	UPDIKE, JOHN C	
STREET ADDRESS	5937 HWY 60 EAST	
CITY-ST-ZIP	LAKE WALES, FL 00000	
TITLE	VD	DELETE
NAME	UPDIKE, JOHN, JR	
STREET ADDRESS	5937 HWY 60 EAST	
CITY-ST-ZIP	LAKE WALES, FL 00000	
TITLE	VD	DELETE
NAME	HERNDON, PHILLIP L	
STREET ADDRESS	5937 HWY 60 EAST	
CITY-ST-ZIP	LAKE WALES, FL 00000	
TITLE	STD	DELETE
NAME	UPDIKE, LAWRENCE C	
STREET ADDRESS	5937 HWY 60 EAST	
CITY-ST-ZIP	LAKE WALES, FL 00000	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE LAWRENCE C. UPDIKE, SECRETARY 4/09/98 (941) 696-1487

CR2E034 (10/97)