## 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 # 417101

1. Corporation Name

QUALITY	CARETAKING OF INDIAN	I HIVEH, INC.					7
Principal Place	e of Business	Mailing Address					
6125 A ATLANTIC BLVD. P.O. BOX 1266						,	
VERO BEACH FL 32966-1064 VERO BEACH FL 32961					DO NOT WEL	TE IN THIS SPACE	
		US			3. Date Incorporated or Qualifed	TE IN THIS SPACE	
					01/19/1973		Ì
2. Principal Place of Business 2a. Mailing Addre		2a. Mailing Address	is		4. FEI Number	Apı	plied For
21		26		59-1432060	Not	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	□ \$8.75 A		
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28		Trust Fund Contribution	Added to	o Fees	
Zip Country		Zip Country		8. This corporation owes the current year Intangible			
24	25		30		Personal Property Tax.		□No
	9. Name and Address of Curr	ent Registered Agent	81	T \$1	10. Name and Address of New F	tegistered Agent	
RΔN	ACK, SIDNEY M., JR.		81	Name			
6125-A ATLANTIC BLVD.			82	82 Street Address (P.O. Box Number is Not Acceptable)			
VERO BEACH FL 32960			83				
¥ <b>(</b> , 1)	O DENOTTE GEORG		03				
			84	City		FL 85 Zip C	Code
		500 + 507 4500 Flid- St-bat	450 0500	a named oor	rporation submits this statement for the	• — ;	registered
office or r	registered agent, or both, in the Statem familiar with, and accept the obligations.	te of Florida. Such change was at	uthorized by	the corporat	tion's board of directors. I hereby accep	of the appointment as req	gistered
SIGNATURE					red when reinstating)	DATE	
OSTIGERO AND DIDECTOR			13.	ni signatore requi	ADDITIONS/CHANGES TO OF		RS IN 12
TITLE	VPD	☐ DELETE	1,1 TITLE		ABBITTONIO PORTO CONTROL O TO C	☐ Change	Addition
NAME	BANACK, SIDNEY M., JR.		1.2 NAME				
STREET ADDRESS	6125-A ATLANTIC BLVD.			T ADDRESS			,
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP				
TITLE	ST	☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME	BANACK, DONNA SUE		2.2 NAME				ļ
STREET ADDRESS	6125-A ATLANTIC BLVD.		2.3 STREE	T ADDRESS			ĺ
CITY-ST-ZIP	VERO BEACH FL		2, 4 CITY-ST-ZIP				
TITLE	PD	☐ DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME	BANACK, WILTON R.		3.2 NAME				
STREET ADDRESS	6075 ATLANTIC BLVD.		3.3 STREET ADDRESS				
CITY-ST-ZIP	VERO BEACH FL		3.4. CITY-ST-ZIP		<u> </u>		
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADORESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				İ
STREET ADDRESS			5.3 STREE	T ADDRESS		9	
CITY-ST-ZIP			5.4 CITY-S	iT-ZIP			
TITLE		☐ DELETE	6.1 TITLE			· ☐ Change	Addition
NAME			6.2 NAME	1			

I hereby certify that the information supplied with this filling 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.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: X SIGNATURE AND TYPED O

**FILED** 

Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90072 005 \*\*\*150.00