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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 11 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F13347

(2)

FIRST AMERICAN HOME CARE OF FLORIDA, INC.

| Principal Place of Business  1084 FLAGLER AVENUE LEESBURG FL 34748-7634 US  2. Principal Place of Business  21 1006 5 Red Run Blvd.  |  | Mailing Address  3528 DARIEN HW P.O. BOX 1056 BRUNSWICK GA 31525-2401 US  2a. Mailing Address 26 (OOG 5 REO Run Blvd.  |   | 3. Date Incorporated or Qualified 3a. Date of Last Report  |  |                             |                              |  |
|--|--|--|---|--|--|-----------------------------|------------------------------|--|
|  |  |  |   | 12/31/1980   | <b>}</b>   | 01/1996                     | СРОП                         |  |
|  |  |  |   | 4. FEI Number 59-2052016   |  | Applied For Not Applicable  |                              |  |
| Suite, Apt. #, etc<br>2] OWINGS Mi   |  | Suite, Apt. #, etc. 27 0WINGS 1  | Mills, MD   | 5. Certificate of Status Desir   | ired 🔲   | \$8.75 /<br>Fee Re          | Additional<br>equired        |  |
| City & Starf:  | •  | City & State <sup>1</sup>  | ·   | 6. Election Campaign Finan Trust Fund Contribution   | ncing  | <b>\$5.00</b><br>Added      |                              |  |
| 4 2117   | Country  [25] USA  | 2117<br>29 21117   | Country<br>30 USA   | 8. This corporation has liab<br>Florida Statutes   | ∑ Yes [  | tax under s                 |                              |  |
|  | e and Address of Curren  | t Registered Agent   | 81 Name   | 10. Name and Address of h  | New Registered   | Agent                       |                              |  |
|  | TION SYSTEM<br>ISLAND ROAD<br>FL 33324   |  |   |  | ress (P.O. Box Number is Not Acceptable)   |                             |                              |  |
| •  |  |  | 84 City   |  | FL   | <b>85</b> Zip               | Code                         |  |
| 44 5   | sions of Sections 607.0502   | 2 and 607.1508, Florida Sta  | lutes, the above-named of   | corporation submits this statement for oration's board of directors. I hereb   | or the purpose of  | f changing it               | s registered<br>registered   |  |
| office or registered a<br>agent it am familiar to<br>SIGNATURE   | vith, and accept the obliga  | ations of, Section 607.0505.   | Florida Statutes.   |  |  |                             |                              |  |
| off be or registered a<br>agent it am familiar to<br>SIGNATURE   | gent of both, in the State<br>vith, and accept the obliga<br>dorprinted traine of registered agent<br>OFFICERS AND   | ations of, Section 607.0505,   | as authorized by the corp<br>Florida Statutes.  OTE Registered Agent signature  |  | DATE   | D DIRECTOR                  | 3S IN 12                     |  |
| off be or registered a agent if any familiar visualization. SIGNATURE Square type  12.  1111 CEO   | in, and accept the obligation and accept the obligation of representation of the obligation of the obl | ations of, Section 607.0505,   | Florida Statutes.  OTE Registered Agent signature :  13.  | required when reinstating)  ADDITIONS/CHANGES TO   | DATE<br>O OFFICERS AND   | DIRECTOR  Change            | RS IN 12                     |  |
| off se or registered a agent it and familiar of Signature, type 12.  1171  | it in printed transfer registred age OFFICERS AND  | ations of, Section 607.0505.  To and the if applicable (h)  DIRECTORS  | Florida Statutes.  NOTE Registered Agent signature i  13.  1.1 TITLE  1.2 NAME  | required when reinstating)  ADDITIONS/CHANGES TO  President Lowrence P. Cirka  | DATE<br>O OFFICERS AND   |                             |                              |  |
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