FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00						FILED			
PROFIT		FLORIDA DEPARTMENT OF STATE			TE	May	14 10	008 R·00	
CORPORATION ANNUAL REPORT		Sandra B. Mortham Secretary of State				May 14 1998 8:0			
1998			VISION OF CORPORATIONS			Secretary of Sta			
DOCUM 1. Corporation I	ENT # F950000007	774 (8)					نــ	,	
PersonaCare (of Clearwater, Inc.								
Principal Place o	f Business rket Street, Suite 3300	Mailing Address 400 West Mar	ket Street	Suite 33	300				
•			le, KY 40202			· · · · · · · · · · · · · · · · · · ·	RITE IN THIS SPA	ACE	
						3. Date Incorporated or Qualified 02/15/1995			
2. Principal Pla 1 400 West N		2a. Mailing Address 26 400 West Market Street				4. FEI Number 59-3290483		Applied For Not Applicable	
Sulte, Apt. #, 2 Suite 3300	etc.	Suite, Apt. #, etc. 27 Suite 3300				5. Certificate of Status Desir	ed	\$8.75 Additional Fee Required	
City & State City & State Louisville,		City & State 28 Louisville, KY				Election Campaign Finance Trust Fund Contribution	cing	\$5.00 May Be Added to Fees	
Zip				Country		8. This comporation owes or has paid the current year intangible			
40202	25 US	29 40202	30 US			Personal Property Tax due	e June 30. X Yo	e8 No	
	lame and Address of Current			B1 Nam		Name and Address of Ne	w registered Age	ent .	
The Prentice-Hall Corporation System, Inc. B2 Streen					at Addres	s (P.O. Box 4 m) r HN) A	cordole)— — I	144	
1201 Hays Street, Suite 105				83	+	-05/19/98		004	
Γallahassee, F		84 City		***150.00		5 Zip Code			
 	he provisions of Sections 607.0						FLI		
registered of	fice or registered agent, or both as registered agent. I am famili	, in the State of Florida.	Such change	e was autho	orized by	the corporation's board of dire	ectors. I hereby ac	cept the	
Sig	gnature, typed or printed name of re	<u>-</u>	-	NOTE: Regis		nt signature required when reinsta			
Z. ITLE	OFFICERS AND PD	DIRECTORS X DELETE	13. 1.1 TITLE			DDITIONS/CHANGES TO OF dent, CEO	Change	X Addition	
VAME	Bardis, John A.		1.2 NAME	.2 NAME Luns		ford, W. Bruce		Addition Addition	
	, , , , , , , , , , , , , ,					West Market Street, Suite 3300 uisville, KY 40202			
TITLE	Atlanta, GA VTD	X DELETE	2.1 TITLE	31 - 211		Operating Officer	Change	X Addition	
NAME	Myll, Donald R		2.2 NAME		Barr,	Michael R.		[3 .44.6.	
TREET ADDRESS	· .					Vest Market Street, Suit ville, KY 40202	te 3300		
TILE	X DELETE 3.1 TITLE		01-24	CFO		Change	X Addition		
NAME.	Cayce, Laura E 3.		3.2 NAME	3.2 NAME		, W. Earl III		_	
TREET ADDRESS STY - ST - ZIP				3.3 STREET ADDRESS 3.4 CITY - ST - ZIP		Vest Market Street, Suit ville, KY 40202	ie 3300		
IITLE	VS	S X DELETE 4.1 TITLE		-· -"		r VP, General Counsel	Change	X Addition	
NAME	Glenn, Jonathan H		4.2 NAME			e, Jill L. Vant Manhat Staart, Suit			
STREET ADDRESS STY - ST - ZIP						Vest Market Street, Suit ville, KY 40202	ic 3300		
ITLE		DELETE	5.1 TITLE			inance	Change	X Addition	
NAME			5.2 NAME		Lechl	eiter, Richard A.		735	
TREET ADDRESS STY - ST - ZIP		4	5.3 STRES 5.4 CITY -	ET ADDRESS ST - ZIP		Vest Market Street, Suit ville, KY 40202	te 3300	5.14	
TITLE		DELETE	6.1 TITLE		VP, T	Tax	Change	Addition	
NAME	6.2 NAM		6.2 NAME		1 4 4 4 4	l, Brian K.		_	
STREET ADDRESS CITY - ST - ZIP						Vest Market Street, Suit ville, KY 40202	ie 3300	·	
4. I hereby cert information is	I ify that the Information supplied ndicated on this annual report o m an officer or director of the co	or supplemental annual re	qualify for the	e exemption	n stated i	in Section 119.07(3)(i), Florida nat my signature shall have the	e same legal effec	t as if made under	
	pears in Block 12 or Block 13 if						-p.: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
SIGNATU	RE: None	Z. Woo				4/24/98	(502) 596-7		
	SIGNATURE AND TYPED	OR PRINTED NAME OF SI	uning OFFIC	JEROR DIR	ECIOR	Date	Davtime F	*nona #	

8TF FL32381F.1

PersonaCare of Clearwater, Inc.

DIRECTORS

Michael R. Barr

Director

Primary Address:

400 West Market Street, Suite 3300

Louisville, KY 40202

W. Bruce Lunsford

Director

Primary Address:

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Louisville, KY 40202

W. Earl Reed, III

Director

Primary Address:

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OFFICER8

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Brian K. Wood

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