FILED 2001 UNIFORM BUSINESS REPORT (UBR) May 22, 2001 8:00 am Secretary of State F95000000774 DOCUMENT # 1. Entity Name 05-22-2001 90793 046 ***150 00 PERSONACARE OF CLEARWATER, INC. Principal Place of Business Mailing Address 680 SOUTH FOURTH STREET 680 SOUTH FOURTH STREET ATTN: TAX DEPARTMENT ATTN: TAX DEPARTMENT 553055 LOUISVILLE, KY 40202 LOUISVILLE, KY 40202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3290483 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM ---Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FI 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12 CR2E034 (11/00) ☐ Change Addition PRESIDENT ☐ Delete TITLE TITLE EDWARD L. KUNTZ NAME NAME 680 SOUTH FOURTH STREET STREET ADDRESS STREET ADDRESS LOUISVILLE, KY 40202 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TREASURER TITLE RICHARD A. LECHLEITER NAME NAME 680 SOUTH FOURTH STREET STREET ADDRESS STREET ADDRESS LOUISVILLE, KY 40202 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change **SECRETARY** ☐ Delete TITLE TITLE JOSEPH L. LANDENWICH NAME NAME 680 SOUTH FOURTH STREET STREET ADDRESS STREET ADDRESS LOUISVILLE, KY 40202 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE VICE PRESIDENT TITLE NAME NAME MICHAEL E. MOAD STREET ADDRESS STREET ADDRESS **680 SOUTH FOURTH STREET** CITY-ST-ZIP LOUISVILLE, KY 40202 CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE SR VICE PRESIDENT NAME RICHARD A. SCHWEINHART STREET ADDRESS STREET ADDRESS 680 SOUTH FOURTH STREET CITY-ST-ZIE CITY-ST-ZIP LOUISVILLE, KY 40202 ☐ Change Addition TITLE ☐ Delete TITLE SR VICE PRESIDENT NAME NAME JAMES H. GILLENWATER, JR STREET ADDRESS STREET ADDRESS 680 SOUTH FOURTH STREET

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

LOUISVILLE, KY 40202

CITY-ST-ZIP

SIGNATURE: MULTIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



Personacare of Clearwater, Inc.

553065

DIRECTORS

James H. Gillenwater, Jr.

Director

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M. Suzanne Riedman

Director

Primary Address:

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Richard A. Schweinhart

Director

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Attachment#

20332

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