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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000004531 (6)

SERVECARE HOME HEALTH OF ST PETERSBURG, INC.

FILED May 19 1998 8:00am Secretary of State



Principal Place of Business ONE SERVICIANTER WAY DOWNERS GROVE IL 6015 2. Purcepted Place of Business 27, 1710 94 th Avenue North 28 2. Suite, April 4, etc.													
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City & State 23] S.L. Peter's burg, FI. 23] S.L. Peter's burg, FI. 24] 3702 Country 25 Country 26] S. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FI. 33324 81 Name 1200 SOUTH PINE ISLAND ROAD PLANTATION FI. 33324 82 Street Address (P.O. Box Number is Not Acceptable) 83 Sire and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FI. 33324 83 Sire Address (P.O. Box Number is Not Acceptable) 84 City PL Street Address (P.O. Box Number is Not Acceptable) 85 Sire Address (P.O. Box Number is Not Acceptable) 86 Sire Address (P.O. Box Number is Not Acceptable) 87 Sire Address (P.O. Box Number is Not Acceptable) 88 Sire Address (P.O. Box Number is Not Acceptable) 89 Sire Address (P.O. Box Number is Not Acceptable) 90 Sire Address (P.O. Box Number is Not Acceptable) 91 Sire Address (P.O. Box Number is Not Acceptable) 92 Sire Address (P.O. Box Number is Not Acceptable) 93 Sire Address (P.O. Box Number is Not Acceptable) 94 City PL Street Address (P.O. Box Number is Not Acceptable) 95 Signature Address (P.O. Box Number is Not Acceptable) 95 Signature Address (P.O. Box Number is Not Acceptable) 95 Signature Address (P.O. Box Number is Not Acceptable) 96 Signature Address (P.O. Box Number is Not Acceptable) 97 Signature Address (P.O. Box Number is Not Acceptable) 98 Signature Address (P.O. Box Number is Not Acceptable) 99 Signature Address (P.O. Box Number is Not Acceptable) 90 Signature Address (P.O. Box Number is Not Acceptable) 90 Signature Address (P.O. Box Number is Not Acceptable) 90 Signature Address (P.O. Box Number is Not Acceptable) 90 Signature Address (P.O. Box Number is Not Acceptable) 90 Signature Address (P.O. Box Number is Not Acceptable) 90 Signature Address (P.O. Box Number is Not Acceptable) 91 Signature Address (P.O. Box Number is Not Acceptable) 92 Signature Address (P.O. Box Number is Not Acceptable) 94 City Signature Address (P.O. Box Number is Not Acceptable) 9		#, e lc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desi	red	ΙΏ			
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C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sociens 607 01.02 and 607 1508. Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both in the State of Forida. Such change was authorized by the corporation's board of directors. I heroby accept the appointment as registered agent, and accept the obligations of Section 607 0505. Fiorida Statutes. SIGNATURE STANDAM AND	24 33.52			[30]								<u></u>	
PLANTATION FL 33324 120 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 120 South Pine Island Road PLANTATION FL 33324 121 Personn to the provisions of Socions 607.002 and 607.1508. Fibrine Situation of Office or registered agent, or hoth, in the Solor of Isorica. Socion 607.0505. Fibrine Situation of Office or registered agent, or hoth, in the Solor of Isorica. Socion 607.0505. Fibrine Situation of Office or registered agent, or hoth, in the Solor of Isorica. Socion 607.0505. Fibrine Situation of Office or registered agent is an infamiliar with, and accept the obligations of, Socion 607.0505. Fibrine Situation. 121	C				81	Name							
PLANTATION FL 33324 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 PLACE and 607 1508, Florida Statutes, the anounnement corporation authorite into statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, and authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607,6505, Florida Statutes. SIGNATURE 12. Of FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 11 THE 12 NAME STREET ADDRESS OTY-51-2P DOWNERS GROVE IL 14 CITY-51-2P DOWNERS GROVE IL 15 TITLE 10 DELETE 21 THE 22 NAME 23 SIREET ADDRESS DOWNERS GROVE IL 24 ADTY-51-2P DOWNERS GROVE IL 25 INSTEL ADDRESS DOWNERS GROVE IL 26 TITLE 27 NAME 38 SERVICEMASTER WAY DOWNERS GROVE IL 28 SIREET ADDRESS DOWNERS GROVE IL 29 ADTY-51-2P DOWNERS GROVE IL 20 ELETE 31 TITLE 32 NAME 33 SIREET ADDRESS DOWNERS GROVE IL 44 CITY-51-2P DOWNERS GROVE IL 25 NAME 45 SIREET ADDRESS DOWNERS GROVE IL 26 NAME 36 SIREET ADDRESS DOWNERS GROVE IL DELETE 57 NAME 58 SIREET ADDRESS DOWNERS GROVE IL DELETE 57 TITLE DEL								<u> </u>					
11. Pursuant to the provisions of Sections 607 03:02 and 607 1508, Florida Stellutos, the above-harmed corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Stellutos, the above-harmed corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Stellutos, the above-harmed corporation's board of directors. I hereby accept the appointment as registered agent, or hoth, in the State of Florida Stellutos. SIGNATURE SIGNATURE 12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THILE DELETE 1.1 THE DELETE 1.1 THE DELETE 1.1 THE DELETE 1.2 THE DELETE 1.2 THE DELETE 1.2 THE DELETE 1.2 THE DELETE 1.3 SERIET ADDRESS DOWNERS GROVE IL 1.2 NAME 2.2 NAME 2.3 SHEET ADDRESS DOWNERS GROVE IL 2.2 NAME 2.3 SHEET ADDRESS DOWNERS GROVE IL 2.4 CHY-ST-ZP 5.2 DOWNERS GROVE IL 3.3 SHEET ADDRESS DOWNERS GROVE IL 1.1 THE DELETE 3.1 THE 3.					62	Street	t Address (P.O. Box Number is Not Acceptable)						
11. Pursuant to the provisions of Sections 607 03.02 and 607 15.08. Florida Statutes, the above-hamed 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 and mamiliar with, and accept the obligations of, Section 607.05.05. Florida Statutes. SIGNATURE Signature type due provide required accept the obligations of, Section 607.05.05. Florida Statutes. Signature type due provide required accept the obligations of, Section 607.05.05. Florida Statutes. Signature type due provide required accept the obligation of, Section 607.05.05. Florida Statutes. Signature type due provide required to the tage address of the statutes of the corporation's board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the obligation's board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered agent, or board of directors. I hereby accept the appointment as registered age				ĺ	83								
1. Pursuant to The provisions of Sections 607 0502 and 607 1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505. Floridal Statutes. SIGNATURE				}	84	City				FI	65 Zip	Code	
SIGNATURE 12. OF LICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD													
Signature typed or printed tuespeckers at party and of the flamphore for signature required when reinstating) DATE	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.												
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14. Thereby 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	CITY-ST-ZIP						<u>L</u>						

officer or director of the corporation Block 12 or Block 13 if changed 2

KATHLEEN BLACK

4-28-98 (630)271-1300