

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV -5 PM 2:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F97000005588

1. Corporation Name

CARETENDERS VISITING SERVICE OF SOUTHWEST FLORIDA, INC.

Principal Place of Business

500 VILLAGE BLVD  
#250  
WEST PALM BEACH FL 33409

Mailing Address

100 MALLARD CREEK RD., STE. 400  
LOUISVILLE KY 40207

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

10/23/1997

5. FEI Number

58-2350224

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
CCEO	YARMUTH, WILLIAM B	100 MALLARD CREEK RD., STE. 400	LOUISVILLE KY 40207
DP	YARMUTH, MARY A	100 MALLARD CREEK RD., STE. 400	LOUISVILLE KY 40207
DST	GUENTHNER, C. STEVEN	100 MALLARD CREEK RD., STE. 400	LOUISVILLE KY 40207

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8. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

CR2ED40 (8/02)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

*Barbara A. Burke*  
SIGNATURE REQUIRED

BARBARA A. BURKE

SPECIAL ASSISTANT SECRETARY

102902

REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*Jim Smith*  
VP Controller  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-28-02

Daytime Phone #

562 891 1080

## **Directors**

William B. Yarmuth, Chairman, CEO & President, 100 Mallard Creek Road, Louisville, KY 40207  
Mary A. Yarmuth, Sr. Vice President, Svc. Develop., 100 Mallard Creek Rd., Louisville, KY 40207  
C. Steven Guenthner, Sr. Vice President & CFO, 100 Mallard Creek Road, Louisville, KY 40207

## **Officers-**

William B. Yarmuth, Chairman, CEO & President, 100 Mallard Creek Road, Louisville, KY 40207  
Mary A. Yarmuth, Sr. Vice President, Svc. Develop., 100 Mallard Creek Road, Louisville, KY 40207  
C. Steven Guenthner, Sr. Vice President & CFO, 100 Mallard Creek Road, Louisville, KY 40207  
Todd Lyles, Sr. Vice President, Planning & Develop., 100 Mallard Creek Road, Louisville, KY 40207  
Carl Smith, Vice President & Controller, 100 Mallard Creek Road, Louisville, KY 40207