

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F98000003743

1. Corporation Name

ASTON CARE SYSTEMS, INC.

Principal Place of Business

2020 CLUBHOUSE DR.  
P.O. BOX 5698  
SUN CITY CENTER FL 33571

Mailing Address

2020 CLUBHOUSE DR.  
P.O. BOX 5698  
SUN CITY CENTER FL 33571

FILED  
May 03, 1999 8:00 am  
Secretary of State

05-03-1999 90023 033 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/26/1998

4. FEI Number

APPLIED FOR 59-3518596

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

HUTCHINSON, RICHARD  
2020 CLUBHOUSE DR.  
SUN CITY CENTER FL 33571

Address change  
only

10. Name and Address of New Registered Agent

81 Name

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

137 S. Pebble Beach Blvd.

83

Suite 101

84

City Sun City Center

FL

85 Zip Code  
33573

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

D

☐ DELETE

NAME

HOFFMAN, ALFRED JR.

STREET ADDRESS

2020 CLUBHOUSE DR.

CITY-ST-ZIP

SUN CITY CENTER FL 33571

TITLE

D

☐ DELETE

NAME

ACKERMAN, DON E

STREET ADDRESS

2020 CLUBHOUSE DR.

CITY-ST-ZIP

SUN CITY CENTER FL 33571

TITLE

PCFO

☐ DELETE

NAME

SMITH, SCOTT

STREET ADDRESS

2020 CLUBHOUSE DR.

CITY-ST-ZIP

SUN CITY CENTER FL 33571

TITLE

V

☒ DELETE

NAME

BLOOMQUIST, JIM

STREET ADDRESS

2020 CLUBHOUSE DR.

CITY-ST-ZIP

SUN CITY CENTER FL 33571

TITLE

ST

☐ DELETE

NAME

HUTCHINSON, RICHARD

STREET ADDRESS

2020 CLUBHOUSE DR.

CITY-ST-ZIP

SUN CITY CENTER FL 33571

TITLE

VAS

☐ DELETE

NAME

BOBBITT, JACKIE

STREET ADDRESS

2020 CLUBHOUSE DR.

CITY-ST-ZIP

SUN CITY CENTER FL 33571

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

137 S. Pebble Beach Blvd. Suite 101

1.4 CITY-ST-ZIP

Sun City Center, FL 33573

2.1 TITLE

☒ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

137 S. Pebble Beach Blvd. Suite 101

2.4 CITY-ST-ZIP

Sun City Center, FL 33573

3.1 TITLE

☒ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

137 S. Pebble Beach Blvd. Suite 101

3.4 CITY-ST-ZIP

Sun City Center, FL 33573

4.1 TITLE

☐ Change

☒ Addition

4.2 NAME

4.3 STREET ADDRESS

Batt, Paul  
137 S. Pebble Beach Blvd. Suite 101

4.4 CITY-ST-ZIP

Sun City Center, FL 33573

5.1 TITLE

☒ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

ST V  
137 S. Pebble Beach Blvd. Suite 101

5.4 CITY-ST-ZIP

Sun City Center, FL 33573

6.1 TITLE

☒ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

137 S. Pebble Beach Blvd. Suite 101

6.4 CITY-ST-ZIP

Sun City Center, FL 33573

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)