

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H62667

1. Entity Name

HEALTH CARE INDUSTRIES, INC.

FILED
Apr 06, 2000 8:00 am
Secretary of State

04-06-2000 90051 030 ***150.00

Principal Place of Business

Mailing Address

2650 N. MILITARY TRAIL
SUITE 240
BOCA RATON FL 33431
US

2714 UNION AVE. EXT.D.
MEMPHIS TN 38112
US

2. Principal Place of Business

720 Goodletree Rd. N.

3. Mailing Address

2714 Union Avenue Extd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#306

City & State

Naples, FL

City & State

Memphis, TN 38112

Zip

34102

Country

USA

Zip

38112

Country

USA

4. FEI Number

59-2543447

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL

Zip Code

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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ELKINS, ROBERT 10065 RED RUN BLVD. OWINGS MILLS MD 21117	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FULCHINO, MARK 10065 RED RUN BLVD. OWINGS MILLS MD 21117	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BENNETT, BRADLEY 10065 RED RUN BLVD. OWINGS MILLS MD 21117	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO WINTERS, STEPHEN H 2714 UNION AVE. EXT.D. MEMPHIS TN 38112	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KOCH, JOHN R 2714 UNION AVE. EXT.D. MEMPHIS TN 38112	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOLING, MICHAEL J 2714 UNION AVE. EXT.D. MEMPHIS TN 38112	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D Stephen H. Winters 2714 Union Avenue Extd. Memphis, TN 38112	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Paul S. Winters 2714 Union Avenue Extd. Memphis, TN 38112	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant-Secretary Linda M. Hooper 2714 Union Avenue Extd. Memphis, TN 38112	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE:

Paul S. Winters
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul S. Winters, Secretary

3/29/0 901-454-2484

Date

Daytime Phone #

CR2E034 (9/99)

HEALTH CARE INDUSTRIES, INC.

Attach.
C0053471
HH 62667

ADDITIONAL DIRECTORS:

Alexander J. Hoinsky
600 W. Germantown Pike, Suite 400
Plymouth Meeting, PA 19462

John C. Miller
2714 Union Avenue Extd.
Memphis, TN 38112-4415

Gerard J. Leimkuhler
2714 Union Avenue Extd.
Memphis, TN 38112-4415