ANNUAL REPORT	COR	PROFIT PORATION	FLORIDA DE		OF STATE	FI May 05 1		
HIGH SPRINGS CARE CENTER, INC.  Incipal Files of Business  Incipal Files  Incipal File  Incipal Files  Incipal File  Incipal Fil				•		Secreta	ry of	State
Maining Address         Maining Address           Oper RF RST ATE O DOX FAHT         In Ref RATE AN URBSING CENTER, INC. 1000 LARK STREET         DO INOT WINTE IN THIS SPACE           O DOX FAHT         In Ref RATE AN URBSING CENTER, INC. 1000 LARK STREET         DO INOT WINTE IN THIS SPACE           Principal Place of Business         28         A Maing Address         Image Address           Suite Apil #, etc.         28         Suite, Apil #, etc.         Image Address           20         Country         29         State, Apil #, etc.         State, Apil #, etc.         State, Apil #, etc.           20         20         Country         27         Country         State, Apil #, etc.         Sta								
Principal Place of Business  24. Malling Address  25. Malling Address  26. Surie, Apl. #, etc.  27. Surie, Apl. #, etc.  27. Surie, Apl. #, etc.  27. Country  28. Cartic-cut of Status Desired  29. Country  20. Name and Address of New Registered Agent  30. Country	OI NE FIRST P O BOX 254	r ave. Ig	% FAIRFAX NURSIN 10701 MAIN STREET		NC.			
Principal Place of Business       28. Maning Address       4. FEI Number       Applicable         Suite, Aplit, etc.       59-1749165       Not Applicable         Suite, Aplit, etc.       10. Control       28. FAR (Applicable)         City & State       27       0. Control       28. FAR (Applicable)         Zip       Country       28. Far (Applicable)       28. Far (Applicable)         Zip       Country       28. Far (Applicable)       50. Country       4. Election company: Financing)         Zip       Country       29. This corporation owes or has pad the current year frampipie       Addied to Fees         Zip       Country       29. This corporation owes or has pad the current year frampipie       20. 20. 20. 20. 20. 20. 20. 20. 20. 20.								
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Zp         Country         Zp         Country         Added to Fees           2p         Country         as         That Fund Contribution         Added to Fees           as         Name and Address of Current Registered Agent         6. This corporation owes or has paid the current registered Agent         10. Name and Address of New Registered Agent           MARTIN, H E         MEMORIAL DR         For Martin Address of Current Registered Agent         10. Name and Address of New Registered Agent           MARTIN, H E         MEMORIAL DR         For Martin Address of New Registered Agent         50           MARTIN, H E         MEMORIAL DR         For Country         For Country         For Country           Portuge of the provisions of Socians 607 (50:02 and 607.150:6, Forida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent         for Proceed agent         for Country           Parsuant to the provisions of Socians 607 (50:02 and 607.150:6, Forida Statutes         The mark we mark advectors. Thereby accept the appointment as registered agent is equilated agent is equilated by the corporation submits this statement for the purpose of changing its registered agent is equilated and by the corporation submits the statement for the purpose of changing its registered agent is equilated and by the corporation submits the statement of the purpose of changing its registered agent is equilated and by the corporation submits the statement of the purpose of changing its registered agent is equilated agent is equilated agent is equilated agent is			27		<u>.</u>	5. Certificate of Status Desired		
28         29         30         Personal Property Tax due June 20         29 Yes         No           IN Anne end Address of Current Registered Agent         10. Name end Address of New Registered Agent         10. Name end Address of New Registered Agent           MARTIN, H E         MEMORIAL DR FORT WHITE FL 32038         91         Name           60         60         Street Address (P.O. Box Number is No! Acceptable)         62           61         64         City         FL         65           64         City         FL         65         64           66         64         City         FL         65         64           7         7         Address of Corporation Submits this Statement for the purpose of changing its registerer agent limitian with, and accept the object agent is the Statement of the appointer as registerer agent limitian with, and accept the object agent is the figure agent	City & State	B						
MARTIN, H E MEMORIAL DR FORT WHITE FL 32038     91     Name       Pursuant to the provisions of Socions 607,05:02 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing lis registered agent 1 am familiar with and accept the dilug alons of, Socions 607,05:05, Florida Statutes, the above named corporation submits this statement for the purpose of changing lis registered agent 1 am familiar with and accept the dilug alons of, Socions 607,05:05, Florida Statutes, the above named corporation submits this statement for the purpose of changing lis registered agent 1 am familiar with and accept the dilug alons of, Socions 607,05:05, Florida Statutes, the above regurded what seetang agent 1 am familiar with and accept the dilug alons of, Socions 607,05:05, Florida Statutes, the appointment as registered agent 1 am familiar with and accept the dilug alons of, Socions 607,05:05, Florida Statutes, the appointment as registered agent 1 am familiar with and accept the dilug alons of, Socions 607,05:05, Florida Statutes, the appointment as registered agent 1 am familiar with and accept the dilug alons of, Socions 607,05:05, Florida Statutes, the appointment as registered agent 1 am familiar with and accept the dilug alons of, Socions 607,05:05, Florida Statutes, the appointment as registered with a statutes and and accept the dilug alons of, Socions 607,05:05, Florida Statutes, the appointment as registered to the Bahnum, Charlante E and the appointment as registered agent 1 appoint face of florida Statutes, the appointment as registered agent 1 appoint face of florida Statutes, the appoint face of florida Statutes,	Zip				uniry			
MeXin R, Tr. E     MEXINGLAL DR     FORT WHITE FL 32038      Portau and to the provisions of Sections 607 05:07 and 607 15:06, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered     agent 1 an itematic with and accept the obligations d. Section 607 05:06, Florida Statutes, the above named corporation's board of directors. I hereby accept the exponent as registered     agent 1 an itematic with, and accept the obligation of directors. I hereby accept the exponent as registered     agent 1 an itematic with and accept the obligation of directors. I hereby accept the exponent as registered     agent 1 an itematic with and accept the obligation of directors. I hereby accept the exponent as registered     agent 1 an itematic with and accept the obligation of directors. I hereby accept the exponent as registered     agent 1 an itematic with and accept the obligation of directors. I hereby accept the exponent as registered     agent 1 an itematic with and accept the obligation of directors. I hereby accept the exponent as registered     agent 1 an itematic with and accept the obligation of directors. I hereby accept the exponent as registered     agent 1 an itematic with and accept the obligation of directors. I hereby accept the exponent as registered     agent 1 an itematic with and accept the obligation of directors. I hereby accept the exponent as registered     agent 1 an itematic with and accept the obligation of directors. I hereby accept the exponent as registered     agent 1 an itematic with and accept the obligation of directors. I hereby accept the exponent as registered     agent and with and accept the obligation of directors. I hereby accept the exponent as registered     agent and accept the obligation of directors. I hereby accept the exponent as registered     agent and accept the obligation of directors and accept the exponent as registered     agent and accept the exponent as registered     agent and accept the exponent as a statet anon			rrent Registered Agent		BI Name	10. Name and Address of New R	egistered Age	nt
FORT WHITE FL 32038      A     Gity     FL     So     Social						tress (P.O. Box Number is Not Accepta	(hie)	
Here         Clip         FL         65         Zip Code           Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above named corporation submits this statement for the pupe societ the appointment as registered agent. Lean factors. I hereby accept the obligations of, Section 607 6055. Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent. Lean factors and the obligations of, Section 607 6055. Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered of florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of florida. Statutes are required when resources         Determination of the corporation of the provision of the obligations of, Sector 607 6055. Florida Statutes are required when resources         Date         Date           MATURE         0FTI CEFRS AND DIFECTORS         13.         ADDITIONS/CHANGES TO OFFICER'S AND DIFECTORS IN 12         Date           12801 MISTY CREEK LANE         13 SINET ADDRESS         14 Gittri S1.2P         Change         Additio           ET ADRESS         12801 MISTY CREEK LANE         23 SINET ADDRESS         Change         Additio           51:2P         FAIRFAX VA 22033         0 ELETE         21 Time         Change         Additio           ET ADRESS         12801 MISTY CREEK LANE         23 SINET ADDRESS         11 Time         Change         Additio           51:2P         FAIRFAX V								
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