

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 # K47702
1. Corporation Name

Housecall Supportive Services, Inc.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/29/88

4. FEI Number

61-1156559

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

2. Principal Place of Business

21 311 Weisgarber Rd., Sw

Suite, Apt. #, etc.

22 City & State

23 Knoxville, TN

24 Zip Country

2a. Mailing Address

26 311 Weisgarber Rd., SW

Suite, Apt. #, etc.

27 City & State

28 Knoxville, TN

29 Zip Country

9. Name and Address of Current Registered Agent

The Prentice-Hall Corporation System, Inc.
1201 Hays Street, Ste. 105
Tallahassee, FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83 50002860795-5

84 City

FL

85 Zip Code

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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	XX DELETE
NAME	Daniel J. Kohl	
STREET ADDRESS	1000 Abernathy Rd., Bld 400, Ste 1825	
CITY-STATE-ZIP	Atlanta, GA 30328	
TITLE	T/D	XX DELETE
NAME	Fred C. Follmer	
STREET ADDRESS	1000 Abernathy Rd., Bld 400, Ste 1825	
CITY-STATE-ZIP	Atlanta, GA 30328	
TITLE	VP/D	XX DELETE
NAME	Shaun Mahoney	
STREET ADDRESS	1000 Abernathy Rd., Bld 400, Ste 1825	
CITY-STATE-ZIP	Atlanta, GA 30328	
TITLE	S	XX DELETE
NAME	Sonya K. Lay	
STREET ADDRESS	123 Center Park Drive	
CITY-STATE-ZIP	Knoxville, TN 37922	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D/P/S	XX Change <input type="checkbox"/> Addition
12 NAME	LaDonna Blom-Antonio	
13 STREET ADDRESS	1600 Tamiami Trl, 4th Floor	
14 CITY-STATE-ZIP	Murdoch, FL 33938-0549	
21 TITLE	T/VP/D	XX Change <input type="checkbox"/> Addition
22 NAME	Gregg Davis	
23 STREET ADDRESS	1600 Tamiami Trl, 4th Floor	
24 CITY-STATE-ZIP	Murdoch, FL 33938-0549	
31 TITLE	D	XX Change <input type="checkbox"/> Addition
32 NAME	Calvin Wiese	
33 STREET ADDRESS	111 North Orlando Avenue	
34 CITY-STATE-ZIP	Winter Park, FL 32789	
41 TITLE	D	<input type="checkbox"/> Change XX Addition
42 NAME	Robert Henderschedt	
43 STREET ADDRESS	111 North Orlando Avenue	
44 CITY-STATE-ZIP	Winter Park, FL 32789	
51 TITLE	Asst. S	<input type="checkbox"/> Change XX Addition
52 NAME	Deborah Haas Thaler	
53 STREET ADDRESS	1000 Abernathy Rd., Bld. 400, Ste. 1825	
54 CITY-STATE-ZIP	Atlanta, GA 30328	
61 TITLE	D	<input type="checkbox"/> Change XX Addition
62 NAME	Mardian Blair	
63 STREET ADDRESS	111 North Orlando Avneue	
64 CITY-STATE-ZIP	Winter Park, FL 32789	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Deborah Haas Thaler

Deborah Haas Thaler/Asst. Secretary 4/30/99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(770) 379-9000

CR/F034 (11/98)

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Housecall Supportive Services, Inc.

Additional Information

OFFICERS

NAME	TITLE	ADDRESS
T. L. Trimble	Assistant Secretary	111 North Orlando Avenue Winter Park, FL 32789
Jeanne Jepson	Assistant Secretary	1600 Tamiami Trail, 4 th Floor Murdoch, FL 33938-0549
Carrie Daniels	Assistant Secretary	311 Weisgarber Rd., SW Knoxville, TN 37919

