

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L11857 (4)

1. Corporation Name

TECH CARE, INC.



Principal Place of Business

Mailing Address

C/O DONALD R. STOKES
3717 CARRINGTON PLACE
TALLAHASSEE FL 32303

C/O DONALD R. STOKES
3717 CARRINGTON PLACE
TALLAHASSEE FL 32303

3. Date Incorporated or Qualified

08/28/1989

3a. Date of Last Report

03/13/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

26-7061349

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STOKES, DONALD R.
3717 CARRINGTON PLACE
TALLAHASSEE FL 32303

81 Name

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

83

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

Donald R. Stokes

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

☐ DELETE

NAME

STOKES, DONALD R.

STREET ADDRESS

3717 CARRINGTON PLACE

CITY- ST- ZIP

TALLAHASSEE FL

TITLE

D

☒ DELETE

NAME

MILLER, LORNE

STREET ADDRESS

3717 CARRINGTON PLACE

CITY- ST- ZIP

TALLAHASSEE FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

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NAME

STREET ADDRESS

CITY- ST- ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

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SIGNATURE:

Donald R. Stokes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-96

Date

904-562-1656

Daytime Phone #

CR2E034 (12/95)