

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90073 045 ***150.00

DOCUMENT # L91785

1. Entity Name

SUPERIOR IN-HOME CARE INC.



Principal Place of Business

**1000 NEW WARRINGTON ROAD
PENSACOLA FL 32506
US**

Mailing Address

**1000 NEW WARRINGTON ROAD
PENSACOLA FL 32506
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3021356

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MAYER, STEPHANIE J
7115 EIGHT MILE CREEK RD.
PENSACOLA FL 32526**

7. Name and Address of New Registered Agent

Name

ANNE Dalton

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

2300 Caddy Shack Lane

Pensacola

City

FL

Zip Code

32526

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **DALTON, ANNE**
STREET ADDRESS **1015 HISTORIC HILLS DR.**
CITY-ST-ZIP **DANDRIDGE TN 37725**

TITLE **V** ☐ Delete
NAME **MAYER, STEPHANIE J**
STREET ADDRESS **7115 EIGHT MILE CREEK ROAD**
CITY-ST-ZIP **PENSACOLA FL 32526**

TITLE **S** ☐ Delete
NAME **MAYER, RUSS S**
STREET ADDRESS **7115 EIGHT MILE CREEK ROAD**
CITY-ST-ZIP **PENSACOLA FL 32526**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Dalton, Anne, PRES** ☒ Change ☐ Addition
NAME
STREET ADDRESS **2300 Caddy Shack Lane**
CITY-ST-ZIP **Pensacola, FL 32526**

TITLE **V #2** ☐ Change ☒ Addition
NAME **Jim Dalton**
STREET ADDRESS **2300 Caddy Shack Lane**
CITY-ST-ZIP **Pensacola, FL 32526**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ANNE Dalton **ANNE Dalton President**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-27-04

Date

850-457-1601

Daytime Phone #