

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 30, 2002 8:00 am
Secretary of State

07-16-2002 90342 035 ***236.25

DOCUMENT # N01000000900

1. Entity Name

TELE-HOMECARE NONPROFIT CORPORATION

Principal Place of Business

Mailing Address

12794 WEST FOREST HILL BLVD., SUITE 33A
 WELLINGTON FL 33414

12794 WEST FOREST HILL BLVD., SUITE 33A
 WELLINGTON FL 33414

40000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEL Number

65-1075922

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

TUMMINIA, MELINDA M
 19000 SE ROBERT DR
 TEQUESTA FL 33469

Name

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

1122 D Keystone Dr.

City

Jupiter

FL

Zip Code

33458

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

7-1-02

After September 13, 2002,
 min. will be \$236.25.

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 PCHM
 TUMMINIA, MELINDA M
 12794 WEST FOREST HILL BLVD., SUITE 33A
 WELLINGTON FL 33414 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 SD
 BENNETT, CHERYL
 12794 WEST FOREST HILL BLVD., SUITE 33A
 WELLINGTON FL 33414 ☐ Delete

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

TITLE
 NAME
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 CITY-ST-ZIP
 VPD
 MEDINA, ERNESTO
 12794 WEST FOREST HILL BLVD., SUITE 33A
 WELLINGTON FL 33414 ☐ Delete

TITLE
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 CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

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 617, 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:

Melinda M. Tumminia

Date

Daytime Phone #

7-1-02 361-294-8185

CR2E037 (4/02)