## 2002 UNIFORM BUSINESS REPORT (UBR) **FILED** Apr 24, 2002 8:00 am Secretary of State **DOCUMENT # N06864** WE CARE OF PALM GREENS, INC. 04-24-2002 90306 013 \*\*\*\*61.25 Principal Place of Business Mailing Address 5801 VIA DELRAY 5801 VIA DELRAY DELRAY BEACH FL 33484 DELRAY BEACH FL 33484 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2475620 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **STEIN. GLADYS** 13656 13 COCONUT PALM COURT **DELRAY BEACH FL 33484** City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 **Addition** (9/01 TITLE ☐ Delete TITLE ☐ Change EPSTEIN RENEE NAME BAGDON, IRENE NAME 13665 DIA AURORA CR2E037 STREET ADDRESS STREET ADORESS 13640-C COCONUT PALM COURT CITY-ST-ZIP CITY-ST-ZIP Delray Bency Fla. 33484 DELRAY BEACH FL ☐ Addition Delete TITLE ☐ Change ٧D NAME NAME SUGERMAN, FRANCES STREET ADDRESS STREET ADDRESS 13841-A ROYAL PALM COURT CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL Change Addition VII)----Delete NAME NAME STEIN, GLADYS STREET ADDRESS STREET ADDRESS 13656 13 COCONUT PALM COURT CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 33484 Change ☐ Addition TITLE Delete TITLE VD. NAME NAME BLANK, EMANUEL STREET ADDRESS STREET ADDRESS 5775 A PHOENIX PALM COURT CITY-ST-ZIP CITY-ST-ZIF DELRAY BEACH FL 33484 TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME SLAVIN, MARGERY STREET ADDRESS STREET ADDRESS 13233 BLUE INDA PALM CRT CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 33484 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STESSEL, HERMINE STREET ADDRESS STREET ADDRESS 5744-B PHOENIX PALM CRT CITY-ST-ZIP CITY-ST-ZIP <u>Delray Beach Fl 33484</u>

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** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/02 (561)