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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N22509

(6)

1. Corporation Name

HUDSON HEALTH CARE, INC.



Principal Place of Business

5803 PALMETTO ROAD
NEW PORT RICHEY FL 34652
US

Mailing Address

P.O. BOX 1058
NEW PORT RICHEY FL 34656-1058
US

3. Date Incorporated or Qualified
09/16/1987

3a. Date of Last Report
04/05/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number
59-2871590

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

SNOW, ROBERT BRUCE
112 NORTH ORANGE AVENUE
BROOKSVILLE FL 33512

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE STD ☐ DELETE
NAME LONG, WILLIAM
STREET ADDRESS RR #3, BOX 180-C
CITY-ST-ZIP CHIEFLND FL

TITLE D ☐ DELETE
NAME DEAL, AGNES
STREET ADDRESS 1912 MOORE DRIVE
CITY-ST-ZIP DADE CITY FL

TITLE PD ☐ DELETE
NAME OSTEEEN, H.E.
STREET ADDRESS P.O. BOX 473
CITY-ST-ZIP TRENTON FL

TITLE VD ☐ DELETE
NAME HOPE, PEGGY
STREET ADDRESS 1515 JUNE AVENUE
CITY-ST-ZIP BROOKSVILLE FL

TITLE D ☐ DELETE
NAME BELL, R E
STREET ADDRESS 24 EAST BROAD STREET
CITY-ST-ZIP BROOKSVILLE FL

TITLE D ☐ DELETE
NAME SNOW, R BRUCE
STREET ADDRESS 112 ORANGE STREET
CITY-ST-ZIP BROOKSVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

H.E. Osteen 4/24/96 352 463 2329

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)

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Hudson Health Care Board of Directors

John Long
P.O. Box 1879
Land O Lakes, FL 33539-1879

Agnes Deal
1912 Moore Drive
Dade City, FL 33525

R.E. (Gene) Bell
24 East Broad Street
Brooksville, FL 34610

Katherine Hirstius
6736 Beach Blvd
Hudson, FL 34667

Bruce Snow
P.O. Box 2060
Brooksville, FL 34605-2060

Steve Manuel
200 West North Ave
Brooksville, FL 34601

Addie Price
5405 Shaw
New Port Richey, FL 34652

Peggy Chatman
1515 June Ave
Brooksville, FL 34601

Ferd Renninger
37235 Temple Street
Zephyrhills, FL 33541

William Long
RR #3, Box 180-C
Chiefland, FL 32626

H.E. (Gene) Osteen
Hwy 129 South
Trenton, FL 32693

Wilson May
Rt 2, Box 521-A
Trenton, FL 32693