FILE NOW: FILING FEE IS \$61.25 NONPROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(5)

FILED Mar 31 1998 8:00am Secretary of State

BON S NC.	ECOURS - MARIA MANOR	NURSING CARE CENTI	ER, I		
Principal Plac	e of Business	Mailing Address			
10300 4TH ST. N. 10300 4TH ST. N. ST. PETERSBURG FL 33716 ST. PETERSBURG FL 33716					3. Date Incorporated or Qualified 06/29/1988 4. FEI Number Applied For
9 Principal P	face of Business	2a. Mailing Address	,		65-0067869 Not Applicable
21					5. Certificate of Status Desired
Suite, Apt. #, etc. Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May Be
22 27 City & State City & State				· · · · · /#:. · · · ·	Trust Fund Contribution
City & State City & State			7. Is this nonprofit corporation a homeowners association?		
Zip	Country	Zip	Count	ту	8. This corporation owes or has paid the current year Intangible
24	25		30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent	8	il Nama	10. Name and Address of New Registered Agent
****			8	1 Name	
WARD, MICHAEL 10300 4TH STREET NORTH			8:	2 Street	Address (P.O. Box Number is Not Acceptable)
	ERSBURG FL 33716		8	3	
OI, FEI	ENODONG PL 307 to				[22] 71- Oodo
			8		d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered ago	ent and title it applicable. (NOTE:	Registered A	gent signature	e required when reinsteting) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PO	DELETE	1.1 TITLE		PD Change & Addition
NAME	TALONE, ALICE SISTER		1,2 NAM		Sr. Mary Catherine Rogers
STREET ADDRESS	10300 4TH STREET NO.		1.3 STRE	ET ADDRESS	10300 4th Street North
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY	ST-ZIP	St. Petersburg, FL
TITLE	D	⋈ DELETE	2.1 TITLE		T) Change Addition
NAME	CRABBE, KAREN		2.2 NAM		Lyons, Lisa
STREET ADDRESS	10300 4TH ST., NORTH ST. PETERSBURG FL		2.3 STRE 2.4 CiTY	ET ADDRESS	10300 4th Street North
CITY-ST-ZIP TITLE	D D	☐ DELETE	3.1 T/TLE		St. Petersburg, FL
NAME	ALLEN, MARY WYATT		3.2 NAM		Allen, Mary Wyatt
STREET ADDRESS	4001 ALABAMA AVE. N.E.		3.3 STRE	ET ADDRESS	10300 4th Street North
CITY-ST-ZIP	ST. PETERSBURG FL	The sections		-ST-ZIP	St. Petersburg, FL 33716
TITLE		☐ DELETE	4.1 TITLE		Debbie Afasano, DON
NAME OTREET LOCRESS			4, 2 NAM		10300 4th Street North
STREET ADDRESS CITY-ST-ZIP			4.3 STRE		St. Petersburg, FL 33716
TITLE		☐ DELETE	5.1 TITLE		□ Change ★★Addition
NAME			5.2 NAM		Mary Spikes ρε
STREET ADORESS			5.3 STAE	et address	10300 4th Street North
CITY-ST-ZIP			5.4 CITY		St. Petersburg, FL 33716 577
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAM	e Et address	_
STREET ADORESS CITY-ST-ZIP			6.4 CITY		0006125
G117-01-71			V.7 UITT	V 41	

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address.

1/12/18