

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State

02-19-2002 90093 024 ****70.00

DOCUMENT # N41822

1. Entity Name

ELDER CARE OF ALACHUA COUNTY, INC.

Principal Place of Business

Mailing Address

3303 N.W. 83RD ST.
 GAINESVILLE FL 32606
 US

P.O. BOX 100303
 GAINESVILLE FL 32610-0303
 US

2. Principal Place of Business

4026 NW 22nd Drive

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Gainesville, FL

City & State

4. FEI Number

59-3051104

Applied For

Not Applicable

Zip
32605

Country
USA

Zip

Country

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

GRILL, LEONARD J
 1329 S.W. 16TH STREET
 GAINESVILLE FL 32610

Name

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

City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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 **DC** Delete
 NAME **BARNETT, LARRY**
 STREET ADDRESS **5123 LUNDRY PLACE**
 CITY-ST-ZIP **BURKE VA 22015**

TITLE **DV** Change Addition
 NAME **Guerrin, Paula**
 STREET ADDRESS **6701 NW 52nd Terr**
 CITY-ST-ZIP **Gainesville, FL 32653**

TITLE **D** Delete
 NAME **MONTGOMERY, JEFF**
 STREET ADDRESS **2630A NW 41ST ST**
 CITY-ST-ZIP **GAINESVILLE FL 32606**

TITLE **DT** Change Addition
 NAME **Carter, Dennis**
 STREET ADDRESS **1329 SW 16th ST**
 CITY-ST-ZIP **Gainesville, FL 32608**

TITLE **D** Delete
 NAME **CHANCE, JEAN**
 STREET ADDRESS **UF, 3046 WEIMER HALL**
 CITY-ST-ZIP **GAINESVILLE FL**

TITLE **DS** Change Addition
 NAME **Klein, Phyllis**
 STREET ADDRESS **4026 NW 22nd DR**
 CITY-ST-ZIP **Gainesville, FL 32605**

TITLE **D** Delete
 NAME **BANKS, LAKAY**
 STREET ADDRESS **1335 SE 11TH AVE.**
 CITY-ST-ZIP **GAINESVILLE FL**

TITLE **D** Change Addition
 NAME **Martin, Gloria**
 STREET ADDRESS **5501 NW 53rd CT**
 CITY-ST-ZIP **Gainesville, FL 32653**

TITLE **D** Delete
 NAME **MARTIN, GLORIA**
 STREET ADDRESS **901 NW 8TH AVE, STE. A-2**
 CITY-ST-ZIP **GAINESVILLE FL**

TITLE **D** Change Addition
 NAME **Vandenbosch, Richard**
 STREET ADDRESS **17118 138th Ave NW**
 CITY-ST-ZIP **Alachua, FL 32615**

TITLE **DT** Delete
 NAME **GAY, GREG H**
 STREET ADDRESS **1329 SW 16TH ST, BOX 100336**
 CITY-ST-ZIP **GAINESVILLE FL 32610**

TITLE **D** Change Addition
 NAME **Gainer, Mary Frances**
 STREET ADDRESS **6015 NW 52nd Terr**
 CITY-ST-ZIP **Gainesville, FL 32608**

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 REQUIRED

1/28/02 ³⁵²⁻ 265-7962

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

Attachment Document #
N41822

Box 11. Continued

Title D Change Addition
Name Tubb, Marilyn
Street Address P. O. Box 100326
City-ST-Zip Gainesville, FL 32610

Title D Change Addition
Name Filer, Vivian
Street Address 1636 SE 14th Ave
City-ST-Zip Gainesville, FL 32641

Title D Change Addition
Name Dwyer, Jeffrey Ph.D.
Street Address P.O. Box 100177
City-ST-Zip Gainesville, FL 32610

Title D Change Addition
Name Cantrell, Diane
Street Address 313 SE 43rd Ave
City-ST-Zip Ocala, FL 34471

Title D Change Addition
Name Besalski, Robert Rev.
Street Address 4520 NW 16th Pl
City-ST-Zip Gainesville, FL 32605
