

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41822

FILED
Feb 08, 2010
Secretary of State

Entity Name: ELDER CARE OF ALACHUA COUNTY, INC.

Current Principal Place of Business:

4026 NW 22ND DRIVE
GAINESVILLE, FL 32605 US

New Principal Place of Business:

Current Mailing Address:

720 SW 2ND AVE,
360A
GAINESVILLE, FL 32601 US

New Mailing Address:

FEI Number: 59-3051104 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KOVAL, CHARLES B
720 SW 2ND AVENUE
360A
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: CD
Name: WARD, HARVEY
Address: P.O. BOX 12941
City-St-Zip: GAINESVILLE, FL 32604 US

Title: D
Name: CUMMINGS, DANIELLE
Address: 7207 SW 24TH AVE.
City-St-Zip: GAINESVILLE, FL 32607 US

Title: SD
Name: CLARIZIO, ANTHONY
Address: 4026 NW 22ND DRIVE
City-St-Zip: GAINESVILLE, FL 32605 US

Title: D
Name: MCGANN, GREG
Address: 4001 NEWBERRY RD., SUITE E-2
City-St-Zip: GAINESVILLE, FL 32607 US

Title: D
Name: EBERSOLE, BILL
Address: 5000 SW 25 BLVD, #1119
City-St-Zip: GAINESVILLE, FL 32608

Title: D
Name: PAULK, ZACK
Address: 18815 NW 115TH AVE.
City-St-Zip: ALACHUA, FL 32615

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY CLARIZIO

S

02/08/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date

N41822

2-8-10

Shands HealthCare

Legal Services

720 SW 2nd Avenue, Suite 360A Gainesville, FL 32601
352.733.0030 352.733.0052 fax

February 11, 2010

Florida Department of State
Division of Corporations
Corporate Filings
P. O. Box 6327
Tallahassee, Florida 32314

Re: Elder Care of Alachua County, Inc.
Document No.: N41822

Dear Sir/Madam:

Please accept this correspondence as Elder Care of Alachua County, Inc.'s request to add, by imaging, additional officers and directors in addition to the six (6) officers/directors listed on the corporation's 2010 efiled annual corporate report. The additional names/addresses/titles are as follows:

Directors:

Mark T. Crews
8000 NW 27th Blvd.
Gainesville, FL 32606

John Starr
4424 NW 13th St., Suite C-5
Gainesville, FL 32609

Sally Dahlem
1001 SW 62nd Blvd.
Gainesville, FL 32607

Scott Toney
804 NW 16th Ave. Ste. B
Gainesville, FL 32601

Michael Katz
2625 N Main Street
Gainesville, FL 32609

Terry Van Nortwick
2826 NE 19th Drive
Gainesville, FL 32609

Robert K. Groeb
PO Box 1468
Gainesville, FL 32602-1468

John Markham
4615 NW 53 Ave. Ste. C
Gainesville, FL 32606

Merton Chumack
2710 NW 105th Drive
Gainesville, FL 32606

Jennifer Fitterman
4200 NW 90th Blvd.
Gainesville, FL 32606

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Rebecca Roberts
1224 NW 98th Terrace
Gainesville, FL 32606

Ex Officio Members: Dennis Carter
Steve Fette

Donald Shook
Denise Thompson

Officers:

Dennis Carter (T)
1329 SW 16th St./P. O. Box 100336
Gainesville, FL 32610

Thank you for your assistance in this matter.

Sincerely,


Faye O. Hall, Paralegal

/foh