FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 JAN 26 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N49605 (1)

1. Corporation Name
WE CARE OF COVERED BRIDGE, INC.

Principal Place of Business	Mailing Address
7290 COVERED BRIDGE BLVD. LAKE WORTH FL 33467	7290 COVERED BRIDGE BLVD. LAKE WORTH FL 33467

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/24/1992
3a. Date of Last Report: 04/22/1994
4. FEI Number: 65-0351062 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

COHEN, THELMA
7290 COVERED BRIDGE BLVD.
LAKE WORTH FL 33467

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Thelma Cohen 1-20-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	D	☐ Change ☒ Addition
NAME	~~BELL, MELVIN~~	1.2 NAME	HERBERT E. COHEN	
STREET ADDRESS	~~894-A WORCSTER LANE~~	1.3 STREET ADDRESS	508-B HOLYOKE LN.	
CITY-ST-ZIP	~~LAKE WORTH FL~~	1.4 CITY-ST-ZIP	LAKE WORTH, FL. 33467	
TITLE	D	2.1 TITLE	D	☐ Change ☒ Addition
NAME	~~BRASILE, FRANK~~	2.2 NAME	HERMAN GLANT	
STREET ADDRESS	~~400 HOLYOKE LANE~~	2.3 STREET ADDRESS	699-A MARLBORO OVAL	
CITY-ST-ZIP	~~LAKE WORTH FL~~	2.4 CITY-ST-ZIP	LAKE WORTH, FL. 33467	
TITLE	D	3.1 TITLE	D	☐ Change ☐ Addition
NAME	GROSSBERG, ANNE	3.2 NAME	GRACE PARIS	
STREET ADDRESS	167 AMHERST LANE	3.3 STREET ADDRESS	484-A HOLYOKE LN.	
CITY-ST-ZIP	LAKE WORTH FL	3.4 CITY-ST-ZIP	LAKE WORTH, FL. 33467	
TITLE	D	4.1 TITLE		☐ Change ☐ Addition
NAME	KAY, ANITA	4.2 NAME		
STREET ADDRESS	174 CAPE COD CIRCLE	4.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	~~KOOGHAGIAN, MARIE~~	5.2 NAME		
STREET ADDRESS	~~159 AMHERST LANE~~	5.3 STREET ADDRESS		
CITY-ST-ZIP	~~LAKE WORTH FL~~	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	~~SEGAL, CLAIRE~~	6.2 NAME		
STREET ADDRESS	~~660-A WORCESTER LANE~~	6.3 STREET ADDRESS		
CITY-ST-ZIP	~~LAKE WORTH FL~~	6.4 CITY-ST-ZIP		

ASM 1137

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)(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.

SIGNATURE: Thelma Lorraine Pres 1/20/95 407-433-5018
SIGNATURE AND TYPED OR PRINTED NAME OF BIDDING OFFICER OR DIRECTOR — Date — Daytime Phone #

0081077