

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N49605

1. Entity 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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0351062

Applied For

Not Applicable

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

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

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 NAME DP ☐ Delete
COHEN, THELMA
STREET ADDRESS 508 B HOLYOKE LN.
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME D ☐ Delete
ROSENTHAL, IDA
STREET ADDRESS 593 LACONIA CIRCLE
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME D ☐ Delete
GROSSBERG, ANNE
STREET ADDRESS 167 AMHERST LANE
CITY-ST-ZIP LAKE WORTH FL

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME D ☐ Delete
KOWALSKY, JOSEPH
STREET ADDRESS 211 DOWN EAST LN.
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME D ☐ Delete
COHEN, HERBERT E
STREET ADDRESS 508 B HOLYOKE LN.
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME DP ☒ Delete
LEVINE, ABRAHAM
STREET ADDRESS 496 B HOLYOKE LN
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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:

HERBERT E. COHEN

1-18-02

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90096 004 ****61.25

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DO NOT WRITE IN THIS SPACE

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