$_\sim$ 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9400003261

FILE)
Jan 19, 2001	8:00 am
Secretary o	

SENIOR CARE MINISTRIES, INC.							19-2001 90067	7 043 ****			
Principal Plac	ce of Business		Mailing Address								
4712 PEPPER BUSH LANE BOYNTON BEACH FL 33436		4712 PEPPER BUSH LANE BOYNTON BEACH FL 33436		700458							
	•	•						 			
2. Principal P	Place of Busines	es ,	3. Mailing Address								
Suite, Apt. #, etc.		<u> </u>	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE						
City & Stat	te		City & State			4. FEI Number	65-0503425		<u> </u>	oplied For]
Zip	-	Country	Zip	Cou	ntry	5. Certificate of	f Status Desired	□ \$	8.75 Addee Require	ot Applicable ditional	1
L	6. Name a	nd Address of Current	Registered Agent			7Name and /	ddress of New R				-
					Name						}
EBERST, ROBERT C 4712 PEPPER BUSH LANE			Stre		Street Addres	ss (P.O. Box Number	is Not Acceptable)]
	N BEACH FL				64.				Tin Cod		
					City			FL	Zip Cod	e 	
8. The above	named entity s	submits this statement fo	or the purpose of changing it	ts registere	ed office or regi	stered agent, or both	, in the state of Flo	rida.			1
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		1									
SIGNATURE.		printed name of registered agent	and title if applicable (NO	OTF Registered	Acent signeture reg	Lired when reinstating)		DATE			
SIGNATURE.		printed name of registered agent	and title if appticable. (NC	TE: Registered	d Agent signature req	uired when reinstating)		DATE			
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12. I hereby 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 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: Robert C. Eberst 1/5/01 56.752.4960
SIGNATURE AND TYPED OR PRINTED PLANE OF SIGNING OFFICER OR DIRECTOR