FILE NOW: FILING FEE IS \$61.25

Mailing Address

2104 SW 52 LN

2a. Mailing Address

CAPE CORAL FL 33914-6848

NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

CAPE CORAL FL 33914-6848

2. Principal Place of Business

2104 SW 52 LN

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

FT MYERS FL



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N95000003941 (0) DOCUMENT #

TENDER LOVING CARE COMPLEX, INC.

21 28 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 27 22 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 28 23 Zip Country Country Žiρ 8. This corporation owes or has paid the current year Intangible Yes 29 Personal Property Tax due June 30. 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name RICHMAN, KENNETH W JR. Street Address (P.O. Box Number is Not Acceptable) **2640 GOLDEN GATE PKWY** 83 **SUITE 206** NAPLES FL 33942 84 85 Zip Code City 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change X Addition D President 11 TITLE TITLE VP-Retail Operations MAGNESS, SHERRY A NAME 1.2 NAME Betty C. Silvin 2638 SW 46th Terrace Cape Coral, FL 33914 2104 SW 52 LN STREET ADDRESS 1.3 STREET ADDRESS **CAPE CORAL FL 33914-6848** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change 2.1 TITLE TITLE VP-Property Assets MAGNESS, JAMES C 22 NAME NAME Virginia Greenwood 2104 SW 52 LN 2.3 STREET ADDRESS STREET ADDRESS 3935 Country Club Blvd Cape Coral, FL 33904 CAPE CORAL FL 33914-6848 CITY-SY-ZIP 2.4 City-ST-ZIP DELETE X Addition Change 3.1 TITLE VP-Fiscal Operations REID. JEFF F. Robert LaGesse 1727 SE 5th Court Cape Coral, FL 33990 NAME 3.2 NAME 1428 SW 27 TERR STREET ADDRESS 3.3 STREET ADDRESS CAPE CORAL FL 33914 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition D Secretary TITLE 4.1 TITLE RICHMAN, KENNETH W JR. NAME 4. 2 NAME 2840 GOLDEN GATE PKWY SUITE 208 STREET ADDRESS 4.3 STREET ADDRESS NAPLES FL 33942 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition **D** Treasurer TITLE 51 TITLE Loubier. Ruth 5.2 NAME NAME 5245 BIG PINE WAY

14. Thereby certify that the information supplied with this filips 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 of the receiver of trustoe 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, from an attention to with an address. 2/15/98

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE

941-542-4800

Change

__ Addition

FILED

Feb 24 1998 8:00am

Secretary of State

Applied For

\$8.75 Additional

Not Applicable

3. Date Incorporated or Qualified

08/16/1995

65-0563230

5. Certificate of Status Desired

4. FEI Number