ANNU	ONPROFIT RPORATION JAL REPORT 1996		FLO	RIDA DE Sand Seci		tate				
OCUI Corporatio	MENT #	N95000	0042	31	(5)					
· •	ELDER FOUND	ATION, INC.					i I deriver die leder bijk stijl t	1811) 1811 981	88/// BIEIE 1188	8 ((180)(81) (8 1
rincipal Plac	e of Business		Mailing Add	ress		<u></u>				
512 NORTH TALLAHASSE	Calhoun Street Ee Fl 32301		512 NORTH TALLAHASS			•				
							3. Date Incorporated or Qualifie 09/06/1995	d 3a . D	ate of Last R	eport
_ ′	Place of Business	<u> </u>	2a. Mailing ا	Address			4. FEI Number 59 - 335 11 23	3	├	oplied For ot Applicable
Suite, Apt.	. #, etc.	2	Suite, Ap	ot. #, etc.			5. Certificate of Status Desired		\$8.75	Additional equired
City & Stat	te	2	City & SI	ate			Election Campaign Financing Trust Fund Contribution	, []	\$5.00	May Be to Fees
Zip	Cc	ountry	zip Zip		<u> </u>	Country	8. This corporation has liability f			
<u>. </u>	9 Name and A	2 ddress of Current Re	elatered Ace	ent	30	- - - - - - - - - - 	Florida Statutes 10. Name and Address of New	Yes Registered		
245 E						183				
TALL	AHASSEE FL 3230)1				83 84 City		Fl	L I I `	Code
TALL	AHASSEE FL 3230)1	d 617.1508, orida. Such c s of, Section	Florida St change w 617.0503	tatutes, the vas authori 3, Florida S	84 City	poration submits this statement for the tion's board of directors. I hereby acc		L I I `	
TALL 11. Pursuani office or agent. I	t to the provisions of registered agent, or am familiar with, and	Sections 617.0502 and both, in the State of Fid accept the obligations disame of registered agent and	title if applicable	Florida Si change w 617.0500	(NOTE: Regis	e above-named cor zed by the corpora statutes.	uired when reinstaling)	purpose of ept the app	f changing its ointment as r	s registered egistered
TALL 11. Pursuan office or agent. I	it to the provisions of registered agent, or am familiar with, and	Sections 617.0502 and both, in the State of Fic accept the obligations of name of registered agent and OFFICERS AND DIS	title if applicable	Florida Sichange w 617.0503	(NOTE: Regis	e above-named cor zed by the corpora statutes.		purpose of ept the app	f changing its ointment as r	s registered egistered
TALL 11. Pursuani office or agent. I SIGNATURE 12. IIILE	it to the provisions of registered agent, or am familiar with, and	Sections 617.0502 and both, in the State of Fid accept the obligations of name of registered agent and OFFICERS AND DISTRICT OFFICERS	title if applicable RECTORS		(NOTE Regis	e above-named cor zed by the corpora Statutes. stered Agent signature req. 13.	uired when reinstaling)	purpose of ept the app	f changing its ointment as r	s registered egistered
11. Pursuani office or agent. I. SIGNATURE 12. ITILE NAME STREET ADDRESS	t to the provisions of registered agent, or am familiar with, and Signature, typed or printe President R. Lowell S 12 N. Cr	Sections 617.0502 and both, in the State of Ficial accept the obligations of name of registered agent and OFFICERS AND DISTRECT OFFI	title if applicable RECTORS		(NOTE Regis	e above-named cor zed by the corpora Statules. stered Agent signature requ 13.	uired when reinstaling)	purpose of ept the app	f changing its ointment as r	s registered egistered RS IN 12
TALL 11. Pursuani office or agent. I SIGNATURE 12. IIILE	it to the provisions of registered agent, or am familiar with, and Signature, typed or printe President R. Lowell SID N. CA	Sections 617.0502 and both, in the State of Fid accept the obligations of the obligations of the state of Figure 1 and OFFICERS AND DISTRIBUTION OFFI AND	RECTORS + 301		(NOTE Regis	e above-named cor zed by the corpora statutes. stered Agent signature registration. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	uired when reinstaling)	purpose of ept the app	f changing its ointment as r	s registered egistered
11. Pursuani office or agent. I signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	to the provisions of registered agent, or am familiar with, and Signatus, typed or printe President R. Lowell SIO N. CATAIIAHAS	Sections 617.0502 and both, in the State of Fic accept the obligations of name of registered agent and OFFICERS AND DILL Mc Donald I how Street agent and Street FL 33: resident Auge of how Street I how Street I how Street	RECTORS + 301	DELET	(NOTE Regis	e above-named cor zed by the corpora statutes. stered Agent signature required. 13. 11 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	uired when reinstaling)	purpose of ept the app	f changing its cointment as r	s registered egistered RS IN 12
11. Pursuani office or agent. I signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS CITY-ST-ZIP	to the provisions of registered agent, or am familiar with, and Signatus, typed or prote President R. Lowell SIB N. CA Tallahas SR. VICA P Sherry L SIB N. CA TAllahas Tallahas	Sections 617.0502 amboth, in the State of Fix accept the obligations of name of registered agent and OFFICERS AND DISTRICT OFFICERS	RECTORS + 301	DELET	(NOTE Regis	e above-named cor zed by the corpora statutes. stered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	uired when reinstaling)	purpose of ept the app	f changing its ointment as r ID DIRECTO Change	s registered egistered RS IN 12 Addition
11. Pursuani office or agent. I . SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	to the provisions of registered agent, or am familiar with, and Signatup, typed or prote R. Lowell SION. CATOLICANS. SR. VICE P. SHERRY L. SION. CATOLICANS.	Sections 617.0502 and both, in the State of Fil accept the obligations of the obligations of the state of Fil accept the obligations of the obligation	HECTORS H 301	DELET	(NOTE. Regis	e above-named cor zed by the corpora statutes. stered Agent signature requirements at the corpora statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	uired when reinstaling)	purpose of ept the app	f changing its cointment as r	s registered egistered RS IN 12
11. Pursuani office or agent. I . SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	it to the provisions of registered agent, or am familiar with, and Signatus, typed or prote President R. Lowell SIA N. CA Tallahas SR. Vica P Sherry L SIA N. CA TAllahas Ulliam Ulliam USIA N. CA	Sections 617.0502 and both, in the State of Fid laccept the obligations of new fide of the community of the	RECTORS + 301	DELET	(NOTE Regis	B4 City a above-named core and the corporal statutes. astered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	uired when reinstaling)	purpose of ept the app	f changing its ointment as r ID DIRECTO Change	s registered egistered RS IN 12 Addition
11. Pursuani office or agent. I . SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	it to the provisions of registered agent, or am familiar with, and Signatus, typed or prote President R. Lowell SIA N. CA Tallahas SR. Vica P Sherry L SIA N. CA TAllahas Ulliam Ulliam USIA N. CA	Sections 617.0502 and both, in the State of Fil accept the obligations of the obligations of the state of Fil accept the obligations of the obligation	RECTORS + 301	DELET	(NOTE. Regis	e above-named cor zed by the corpora statutes. stered Agent signature requirements and the corpora statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	uired when reinstaling)	purpose of ept the app	f changing its ointment as r ID DIRECTO Change	s registered egistered RS IN 12 Addition
11. Pursuani office or agent. I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	it to the provisions of registered agent, or am familiar with, and Signatus, typed or prote President R. Lowell SIA N. CA Tallahas SR. Vica P Sherry L SIA N. CA TAllahas Ulliam Ulliam USIA N. CA	Sections 617.0502 and both, in the State of Fid laccept the obligations of new fide of the community of the	RECTORS + 301	DELET DELET	E 1	B4 City a above-named core and the corporal statutes. astered Agent signature required to the corporal statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	uired when reinstaling)	purpose of ept the app	f changing its ointment as r ID DIRECTO Change Change	RS IN 12 Addition
11. Pursuani office or agent. I signature 12. Title name street address city-st-zip	to the provisions of registered agent, or am familiar with, and Signatus, typed or protes R. Lowell SIO N. CATAIIAHAS SR. VERY L. SIO N. CATAIIAHAS COOWILLIAM SIO N. CATAIIAHAS SIO N. CATAIIAHA	Sections 617.0502 and both, in the State of Fid laccept the obligations of new fide of the community of the	RECTORS + 301	DELET DELET	E :	e above-named cor zed by the corpora statutes. stered Agent signature requirements and the corpora statutes. 13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	uired when reinstaling)	purpose of ept the app	f changing its ointment as r ID DIRECTO Change Change	RS IN 12 Addition
11. Pursuani office or agent. I signature 12. Title name street adoress city-st-zip title name	to the provisions of registered agent, or am familiar with, and Signatus, typed or protes R. Lowell SIO N. CATAIIAHAS SR. VERY L. SIO N. CATAIIAHAS COOWILLIAM SIO N. CATAIIAHAS SIO N. CATAIIAHA	Sections 617.0502 and both, in the State of Fid laccept the obligations of new fide of the community of the	RECTORS + 301	DELET DELET	E 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	B4 City B above-named core and the corporal statutes.	uired when reinstaling)	purpose of ept the app	f changing its ointment as r ID DIRECTO Change Change	RS IN 12 Addition Addition
TALLI 11. Pursuani office or agent. I signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	AHASSEE FL 3230 It to the provisions of registered agent, or am familiar with, and Signature, typed or printe President R. Lowell SID N. CA TAIJAHAS SR. VIAP LOWELL SID N. CA TAIJAHAS COO WILLIAM SID N. CA TAIJAHAS SID N. CA TAIJAHAS SID N. CA	Sections 617.0502 and both, in the State of Fid laccept the obligations of new fide of the community of the	RECTORS + 301	DELET DELET	E E E E	B4 City a above-named core and the corporal statutes. astered Agent signature required. 13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	uired when reinstaling)	purpose of ept the app	f changing its ointment as r	RS IN 12 Addition Addition
TALLI 11. Pursuani office or agent. I signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	AHASSEE FL 3230 It to the provisions of registered agent, or am familiar with, and Signature, typed or printe President R. Lowell SID N. CA TAIJAHAS SR. VIAP LOWELL SID N. CA TAIJAHAS COO WILLIAM SID N. CA TAIJAHAS SID N. CA TAIJAHAS SID N. CA	Sections 617.0502 and both, in the State of Fid laccept the obligations of new fide of the community of the	RECTORS + 301	DELET DELET	E I	B4 City B above-named core and the corporal statutes. Stered Agent signature required to the corporal statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 STREET ADDRESS 5.5 STREET ADD	uired when reinstaling)	purpose of ept the app	f changing its ointment as r	RS IN 12 Addition Addition Addition
TALL 11. Pursuani office or agent. I signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE	AHASSEE FL 3230 It to the provisions of registered agent, or am familiar with, and Signature, typed or printe President R. Lowell SID N. CA TAIJAHAS SR. VIAP LOWELL SID N. CA TAIJAHAS COO WILLIAM SID N. CA TAIJAHAS SID N. CA TAIJAHAS SID N. CA	Sections 617.0502 and both, in the State of Fid laccept the obligations of new fide of the community of the	RECTORS + 301	DELET DELET	E I	B4 City B above-named core and the corporal statutes. Stered Agent signature required to the corporal statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.1 TITLE	uired when reinstating) ADD/TIONS/CHANGES TO OF	e purpose of ept the appoint DATE FICERS AN	f changing its ointment as r	RS IN 12 Addition Addition Addition
TALL 11. Pursuani office or agent. I signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP	to the provisions of registered agent, or am familiar with, and Signatus, typed or prine President R. Lowell SID N. CA TAIJAHAS SR. VICA SID N. CA TAIJAHAS COMITIAN SID N. CA TAIJAHAS SID N. CA TAIJAHA	Sections 617.0502 and both, in the State of Fid laccept the obligations of new fide of the community of the	RECTORS + 301	DELET DELET	E I	B4 City B above-named core and the corporal statutes. Stered Agent signature required to the corporal statutes. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 STREET ADDRESS 5.5 STREET ADD	8000018 -07/02/9601	e purpose of ept the appoint DATE FICERS AN	f changing its ointment as r	RS IN 12 Addition Addition Addition
11. Pursuani office or agent. I signature 12. Title name street address city-st-zip title name	to the provisions of registered agent, or am familiar with, and Signature typed or prote President R. Lowell SID N. CA Tallahas SR. VIRRY LOWELL SID N. CA TALLAHAS SR. VIRRY LOWELL SID N. CA TALLAHAS SR. VIRRY LOWELL SID N. CA TALLAHAS STALLAHAS SID N. CA TALLAHAS SID N. CA TA	Sections 617.0502 and both, in the State of Fil accept the obligations of mane of registered agent and OFFICERS AND DILL OFFICERS AND CONTROL OFFICERS AND CONTROL OFFICERS OFFICERS AND CONTROL OFFICERS	RECTORS + 301 301	DELET DELET DELET	E I	B4 City a above-named core and by the corporal statutes. astered Agent signature requirements and agent signature requirements and agent signature requirements. 1.1 ITILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.5 TITLE 6.5 NAME 6.5 STREET ADDRESS 6.5 CITY-ST-ZIP	uired when reinstating) ADD/TIONS/CHANGES TO OF	DATE FICERS AN 0130	f changing its ointment as r ID DIRECTO Change Change Change Change	RS IN 12 RS IN 12 Addition Addition Addition Addition Addition