

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004049

FILED
Jan 07, 2004
Secretary of State

Entity Name: ALZHEIMER'S FAMILY SERVICES, INC.

Current Principal Place of Business:

3454 E OLIVE RD
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

3454 E OLIVE RD
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 59-3394242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RALSTON, LAURA G
3454 E OLIVE RD
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KICHLER, ADRIENNE
Address: 4870 MANDLETE
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: KRUMEL, VIVIAN
Address: 3298 SUMMIT BLVD 333-A
City-St-Zip: PENSACOLA, FL 32504

Title: DS () Delete
Name: MURPHY, KATHERINE
Address: 309 DOLPHIN ST
City-St-Zip: GULF BREEZE, FL 32561

Title: D () Delete
Name: GAMBILL, JACK
Address: 3841 NOBLES ST
City-St-Zip: PENSACOLA, FL 32514

Title: D () Delete
Name: BRETT, ANN
Address: 10 PORT ROYAL WAY
City-St-Zip: PENSACOLA, FL 32501

Title: DD () Delete
Name: CARR, JOHN
Address: 3 W. GARDEN ST
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KICHLER, ADRIENNE
Address: 4870 MANDLETE
City-St-Zip: PENSACOLA, FL 32504

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MURPHY, KATHERINE
Address: 10100 HILLVIEW DR #1302
City-St-Zip: PENSACOLA, FL 32514

Title: D (X) Change () Addition
Name: GAMBILL, JACK
Address: 3100 OWEN BELL LN
City-St-Zip: PENSACOLA, FL 32507

Title: D (X) Change () Addition
Name: BRETT, ANN
Address: 105 PORT ROYAL WAY
City-St-Zip: PENSACOLA, FL 32502

Title: DT (X) Change () Addition
Name: CARR, JOHN
Address: 3 W. GARDEN ST
City-St-Zip: PENSACOLA, FL 32501

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACK GAMBILL

D

01/07/2004

Electronic Signature of Signing Officer or Director

Date