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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STÂTE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name N96000006338 (5)

HUBERT APARTMENTS, INC.

Prin	cipal Pl	ace of	Business
£ 3/17	MODEL	2410	CTOECT

Mailing Address

FILED Mar 28 1997 8:00am Secretary of State



Suite Apt # etc. Suite Country Suite Address of New Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent Suite Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number i	5707 NORTH 22ND STREET TAMPA FL 33610			5707 NORTH 22ND STREET TAMPA FL 33610-4350			İ								
Suite Apt #, etc. Suite Apt #, etc. Suite, Apt #, etc.													Date of Last Report		
Suite, April etc. Suite, April etc. Suite	Principal Place of Business 2a. Mailing Address			Address				4. FELL	umber 🕳	11 1 44/16	1		App	lied For	
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2 2 2 2 2 2 2 2 2 2	Suite, Apt. #, etc.			_				5. Certi	ificate of Stat	us Desired	X				
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MENTAL HEALTH CARE, INC. 5707 NORTH 22ND STREET 33610 FL 33610 44 City FL 85 Zip Code 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 of registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors, 1 hereby accept the appointment as registered agent. In amendment with an accept the obligations of Section 617,0502 and 617,1508, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE 12.		g, Name and Address of Curr	ent negistered Ag	OIII.	a a	1 6	Vame	IV. Herr	io anu Auun	iss of New Ne	gistereu.	Main		*	
STORMATURE STO	AFFAITAL	UEALTH CARE INC			Ľ	Έ	44/10								
33610 FL 33610 Salar					8:	2 3	Street Addre	ss (P.O. B	ox Number is	Not Acceptab	le)				
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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent and maintain with, and accept the obligations of . Section 617.0503. Florida Statutes. SIGNATURE SIGNATURE 12.					<u> </u>	.					· · · · · · · · · · · · · · · · · · ·				
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 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, and make the purpose of changing its registered agent. I am familiar with and accept the obligations of Section 617.0503. Florida Statutes SIGNATURE Sign	33610 FL	. 33610			"	1									
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-harmed corporation submits this statement for the purpose of changing its registered agent and from the purpose of changing its registered agent arm familiar with, and accept the obligations of Section 617,0503, Florida Statutes. SIGNATURE SIGNATURE 12: OFFICERS AND DIRECTORS PD President PARSONS, SALLY 908 BRUCE ST. TITLE AND THE STREET ADDRESS STEET ADDRESS CRITY-ST-2P TITLE 1005 E. BARKER ST #2 PLANT CITY FL 33567 D D Trector MAME 1005 E. BARKER ST #2 PLANT CITY FL 33567 D D Trector MAME CHOATE, ROBERT 2019-SI-2P TAMPA FL 33629 D D D Trector MAME MAME SIRRET ADDRESS CRITY-SI-2P D D D Trector MAME MAME ALCHY-SI-2P D D D Trector MAME ALCHY-SI-2P ALCH					8	1	City				C 1	85	Zip Co	xde	
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Information indicated on this annual replacement annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if charged, or on an attachment with an address.

Sally Parsons, Chairperson of the Board Fig. D