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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9700000386

1. Corporation Name

POLK COUNTY FAMILY CAREGIVERS, INC.



04-19-1999 90012 045 ****61.25

4569 ARINGTON PARK DRIVE LAKELAND FL 33901 2. Principal Place of Business 2. Mailing Address 2. Date incorporated or Qualified 01/23/1997 2. Principal Place of Business 2. Mailing Address 2. Date incorporated or Qualified 01/23/1997 3. Date incorporated or Qualified 01/23/1997 3. Subtraction 01/23/1997 3. Subtraction 01/23/1997 3. Subtraction 01/23/1997 3. Date incorporated or Qualified 01/23/1997 3. Subtraction 01/23/1997 3. Subtraction 01/23/1997 3. Date incorporated or Qualified 01/23/1997 3. Subtraction 01/23/1997 3. Subtraction 01/23/1997 3. Date incorporated or Qualified 01/23/1997 3. Date inc	Principal Place	e of Business	Mailing Address	Mailing Address						
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9. Name and Address of Current Registered Agent 10. Name and Address of Name Registered Agent 10. Name and Address 10. Name and Address		Country					6 Election Campaign Financing		\$5.00	May Bo
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name MERSCH, HENRY 4509 ARUNGTON PARK DRIVE LAKELAND FL 33801 12. Street Address (P.O. Box Number is Not Acceptable) 13. Street Address (P.O. Box Number is Not Acceptable) 14. 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. I am finalize with, national accept the obligations of, Section 517 0503. Florida Statutes. 15. Addition 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 finalize with, national accept the obligations of, Section 517 0503. Florida Statutes. 16. SIGNATURE 17. OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. NAME 10. MERSCH, HENRY 10. STREET ADDRESS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. NAME 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. NAME 15. STREET ADDRESS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Name 17. NAME 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. NAME 10. NAME 10. NAME 11. NAME 11. NAME 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. NAME 15. NAME 16. NAME AND THE ADDRESS 16. NAME AND THE ADDRESS 17. NAME 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. NAME 10. NAME 10. NAME 11. NAME 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. NAME 10. NAM		<u> </u>		' – '			, I]		
MERSCH, HENRY 4509 ARLINGTON PARK DRIVE LAKELAND FL 33801 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. I am familiar with, and accept the obligations of, Section 617,0502, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617,0502, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 13. TITLE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 13. TITLE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 13. TITLE 14. TITLE 15. TITLE 15	24									
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AKELAND FL 33801 11. Pursuant to the provisions of Sections 817 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 approximent as registered agent, and accept the colligations of, Section 617 0503, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. NAME MERSCH, HENRY 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. NAME MERSCH, HENRY 4509 ARLINGTON PARK DRIVE AKELAND FL 33801 14. CITY-ST-2P LAKELAND FL 33803 14. CITY-ST-2P 14. CITY-ST-2P 14. CITY-ST-2P 15. TITLE D	MERSCH, HENRY				82 3	Street Addres	et Address (P.O. Box Number is Not Acceptable)			
LAKELAND FL 33801 11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and femiliar with, and accept the obligations of, Section 617,0503, Florids Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ITILE 14. OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. OFFICERS AND DIRECTORS IN 12. 17. STREET ADDRESS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. MERSCH, HENRY 10. MERSCH, HENRY 11. STREET ADDRESS 11. STREET ADDRESS 11. STREET ADDRESS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. STREET ADDRESS 14. CITY. ST. ZIP 14. CITY. ST. ZIP 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. Change Addition 17. Change Addition 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. Change Addition 29. STREET ADDRESS 2			<u>}</u>	83						
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The 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 richards was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such richards was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes. SIGNATURE Signature Directed name of registered agent and title if Epipicable. (NOTE Registered Agent algunture required when reciritating) DATE				[·	84	City		EI	85 Zip (Code
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14. I hereby certify that the information supplied with this filing 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

6665630