

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000001224

FILED
Apr 30, 2003
Secretary of State

Entity Name: CONTINUING CARE, INC.

Current Principal Place of Business:

1662 QUAIL LAKE DRIVE
VENICE, FL 34293 US

New Principal Place of Business:

Current Mailing Address:

1662 QUAIL LAKE DRIVE
VENICE, FL 34293 US

New Mailing Address:

FEI Number: 59-1943479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, WILLIAM R
1662 QUAIL LAKE DRIVE
VENICE, FL 34293 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: CD () Delete
Name: MARTIN, WILLIAM R
Address: 1662 QUAIL LAKE DRIVE
City-St-Zip: VENICE, FL 34293 US

Title: D () Delete
Name: MARTIN, ALICE L
Address: 1662 QUAIL LAKE DRIVE
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: LONG, JOHN REV
Address: 30240 RANKERT ROAD
City-St-Zip: NORTH LIBERTY, IN 46554

Title: D () Delete
Name: LEININGER, KATHY
Address: 19338 MECHANISVILLE RD
City-St-Zip: TIMBERVILLE, VA 24060

Title: D () Delete
Name: MARTIN, KENNETH P
Address: PO BOX 8084
City-St-Zip: STATE COLLEGE, PA 16803

Title: D () Delete
Name: JOHANNES, BRENDA J
Address: 3308 PANSY ROAD
City-St-Zip: CLARKSVILLE, OH 45113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: BARLOW, JOHN W
Address: 4150 E IOWA AVENUE, APARTMENT 204
City-St-Zip: DENVER, CO 802223735

Title: D (X) Change () Addition
Name: MARTIN, DAVE
Address: 7220 CHURCHHILL DRIVE
City-St-Zip: WAKE FOREST, NC 27587

Title: D (X) Change () Addition
Name: BLOOD, DAVID
Address: 110 CORLISS LANE
City-St-Zip: EUGENE, OR 97404

Title: D (X) Change () Addition
Name: HINKLE, DAVID
Address: 15324 SW 284H STREET #75
City-St-Zip: HOMESTEAD, FL 33033

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: WILLIAM R. MARTIN

C

04/30/2003

Electronic Signature of Signing Officer or Director

Date