2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State
04-24-2002 90326 011 ****70.00

DOCUMENT # N98000000984

1. Entity Name

FAMILY EXTENDED CARE OF SARASOTA, INC.

Principal Place of Business	Mailing Address
1411 NORTHWEST 14TH AVENUE MIAMI FL 33125	1411 NORTHWEST 14TH AVENUE MIAMI FL 33125

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
10899 S.W. 4th Street	same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, FL	City & State
Zip: 33174 Country: USA	Zip Country

4. FEI Number 65-0839761 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ANIELLO, JOSEPH ED.D. 1411 NORTHWEST 14TH AVENUE MIAMI FL 33125	Name: Roy R. Lustig, Esq. Street Address (P.O. Box Number is Not Acceptable): 2600 Douglas Road, Suite 908 City: Coral Gables, FL Zip Code: 33134

8. 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 _____ Roy R. Lustig, Esq. DATE 4/11/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCD ANIELLO, JOSEPH 1411 NORTHWEST 14TH AVENUE MIAMI FL 33125	☐ Delete	PD Aniello, Joseph 10899 S.W. 4th Street Miami, Florida 33174	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD SCHILLENGER, JACK 1225 NE 93 ST. MIPOLL FL 33138	☑ Delete	CD Lustig, Roy 2600 Douglas Road, Suite 908 Coral Gables, FL 33174	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST LUSTIG, ROY R 2600 DOUGLAS RD. 911 CORAL GABLES FL 33134	☑ Delete	VCD Gentry, Ray 4403 Chowning Way Atlanta, GA 30338	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (9/01)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Joseph A. Aniello, PD 4-10-02 (305) 547-2189
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #