## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # N98000006420

ELEOS-THE CARE NETWORK, INC.

Principal Place of Business

Mailing Address

14376 COLONIAL GRAND BLVD. #2307 ORLANDO FL 32837

14376 COLONIAL GRAND BLVD. #2307 ORLANDO FL 32837

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90134 030 \*\*\*\*61.25



2. Principal Pl	ace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed		
21		26 PO BOY 771	<u>077'</u>	1	11/12/1998	<del></del>	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<u></u>		4. FEI Number	<del> </del>	lied For
22		27			59-3530423		Applicable
City & State	,	City & State			5. Certificate of Status Desired	\$8.75 Ad	I
23		28 ORlando, F	<u>L</u>			Fee Req	
Zip	Country	Zip	Country		6. Election Campaign Financing	\$5.00 A	
24	25	29 32877-0777 30	<u> </u>		Trust Fund Contribution	Added to	Fees
	9. Name and Address of Current I	Registered Agent		10. Name and Address of New Registered	Agent		
				81 Name			
HUKILL, JIM				82 Street Address (P.O. Box Number is Not Acceptable)			
14376 COLONIAL GRAND BLVD. #2307							
ORLANDO FL 32837						_	]
URLANDU FL 3203/						los Zin C	
	•		84	City	FL	_   <b>85</b>   Zip Co	ode
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							
effice or registered agent or both in the State of Florida. Such change was authorized by the comporation's position's position's interest accept the appointment as registered.							
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE Singulars typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
12.	Signature, typed or printed name of registered agent a OFFICERS AND		13.	t alganziolo roduno	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 12
	D OFFICERS AND	□ DELETE	1.1 TITLE	2	resident/C/O	Change	Addition
TITLE	<u> </u>		1.2 NAME		respective to	_	Į
NAME	HUKILL, JIM	#0007		ADDDESS			]
STREET ADDRESS	14376 COLONIAL GRAND BLVD.	#2301	1.3 STREET		•	•	
CITY-ST-ZIP	ORLANDO FL 32837	TO DELETE	1.4 CITY-ST	-ZIP		Change	Addition
TITLE			2.1 TITLE			Allondingo	
NAME	RAKES, MIKE REV		2.2 NAME	٠,	3231 Ameca Circle		1
STREET ADDRESS	14010 COLOTANE CITATO DE D. 18 COO.		2.3 STREET	ADDRESS 5	1231 HIMACA CIPCIE	=	
CITY-ST-ZIP			2.4 CITY-S	T-ZIP	The second secon		
TITLE	D DELETE 3.1 T		3.1 TITLE			Change	☐ Addition
NAME	MOFFITT, JOHNNY		3.2 NAME				
STREET ADDRESS	14376 COLONIAL GRAND BLVD.	#2307	3.3 STREET	ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32837		3.4. CITY-S	T-ZIP			
TITLE		☐ DELETE	4.1 TITLE	Se	ec./Tres./D	Change	Addition
NAME			4. 2 NAME	R	honette Hukill		• ,
STREET ADDRESS	<b>'</b>		4.3 STREET	ADDRESS 14	4396 Coloniel Grand Blud	<del>-</del> 2307	,
CITY-ST-ZIP	•		4.4 CITY-ST		rlando, PL 32837		
TITLE		DELETE	5.1 TITLE		O *	Change	Addition
			5.2 NAME	$ \bar{p}_{\ell} $	enny HARRISON,		
NAME			5.3 STREET	ADDRESS A	7 Cedar Street		
STREET ADDRESS			5.4 CITY-S		aurenceville UA	23868	,
CITY-ST-ZIP			6.1 TITLE	- 14	VP" ID	Change	Addition
TITLE	•		6.2 NAME	1 _			-4
NAME		4		TADDOESS J	TEFF Steinberg.	•	,
STREET ADDRESS	•		6.3 STREET		835 Keystone Drive	~277	
CITY-ST-ZIP		<u> </u>	6.4 CITY-S	I-ZIP	nemphis TN 38115-5	<u> </u>	<u> </u>

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.

Additions to OFFICES & Directors

Title - "D" (Addition)

NAME - Rickey Cotton

Street/Address - 1319 Glenview Lane

City /St/zip - Lake/And, 71 33813

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