

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000006420

FILED  
Apr 02, 2002 8:00 AM  
Secretary of State

Entity Name: ELEOS-THE CARE NETWORK, INC.

## Current Principal Place of Business:

2015 RESTON ROAD  
#2211  
ORLANDO, FL 32837 US

## New Principal Place of Business:

2113 EAST SOUTH STREET  
SUITE 6  
ORLANDO, FL 32803 US

## Current Mailing Address:

PO BOX 770777  
ORLANDO, FL 32877

## New Mailing Address:

FEI Number: 59-3530423

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUKILL, JIM  
2015 RESTON RD #2211  
ORLANDO, FL 32837

## Name and Address of New Registered Agent:

HUKILL, JIM  
2015 RESTON RD #2213  
ORLANDO, FL 32837

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:

04/02/2002

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PCO ( ) Delete  
Name: HUKILL, JIM  
Address: 2015 RESTON ROAD #2211  
City-St-Zip: ORLANDO, FL 32837

Title: D ( ) Delete  
Name: SHEP, CURL  
Address: 721 PINER DRIVE  
City-St-Zip: ORLANDO, FL 32825

Title: D ( ) Delete  
Name: MOFFITT, JOHNNY  
Address: P.O. BOX 670682  
City-St-Zip: DALLAS, TX 753670682

Title: STD ( ) Delete  
Name: HUKILL, RHONETTE  
Address: 2015 RESTON ROAD #2211  
City-St-Zip: ORLANDO, FL 32837

Title: D ( ) Delete  
Name: HARRISON, PENNY  
Address: 27 CEDAR STREET  
City-St-Zip: LAWRENCEVILLE, VA 23868

Title: VPD ( ) Delete  
Name: STEINBURG, JEFF  
Address: P.O. BOX 17511  
City-St-Zip: MEMPHIS, TN 381870511

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCO (X) Change ( ) Addition  
Name: HUKILL, JIM  
Address: 2015 RESTON ROAD #2213  
City-St-Zip: ORLANDO, FL 32837

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

Title: D (X) Change ( ) Addition  
Name: BROWN, CORDELL  
Address: P.O. BOX 1087  
City-St-Zip: COSHOCTON, OH 43812

Title: STD (X) Change ( ) Addition  
Name: HUKILL, RHONETTE  
Address: 2015 RESTON ROAD #2213  
City-St-Zip: ORLANDO, FL 32837

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

Title: VPD (X) Change ( ) Addition  
Name: STEINBURG, JEFF  
Address: P.O. BOX 590533  
City-St-Zip: ORLANDO, FL 32859-053

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: JIM HUKILL

PRES

04/02/2002

Electronic Signature of Signing Officer or Director

Date

CHAROLLETTE HENNINGSEN  
13302 HERON COVE DRIVE  
ORLANDO, FL 32837

ELLEN STEINBERG  
P.O. BOX 590533  
ORLANDO, FL 32859-0533