

P00000063308

Requester's Name



ElderServe, Inc.

1929 Stingray Court
Belleville, IL 62221-6705

300007890703--4
-09/20/02--01028--010
*****70.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
02 OCT 28 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RAIRO Chan
Examiner's Initials 10/19/29



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

October 18, 2002

JAMES H. FULD
ELDERSERVE, INC.
1929 STINGRAY COURT
BELLEVILLE, IL 62221-6705

SUBJECT: CAROLSTAN, INC.
Ref. Number: P00000063308

We have received your document for CAROLSTAN, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Our records reflect a different address for the current registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 802A00057988

RECEIVED

02 OCT 28 AM 11:30

DIVISION OF CORPORATIONS

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CAROLSTAN, INC.
2. The principal office address: 6450 UNIVERSITY BOULEVARD, SUITE 7
WINTER PARK FLORIDA 32792
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/29/2000 Document number: P00000063308
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

NORM LIEBERMAN
6438 ~~6450~~ UNIVERSITY BOULEVARD, SUITE 7
WINTER PARK FLORIDA 32792

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

IVAN M. LEFKOWITZ
430 NORTH MILLS AVENUE
(P.O. Box or personal mailbox NOT acceptable)
ORLANDO FLORIDA 32803

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

James H. Fuld
(Signature of an officer, chairman or vice chairman of the board)

JAMES H. FULD, TREASURER
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Ivan M. Lefkowitz
(Signature of Registered Agent)

10-7-02
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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TALLAHASSEE, FLORIDA