2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000023021

1. Entity Name
GARDENS PROFESSIONAL CARE MANAGEMENT INC.

Principal Place of Business	Mailing Address
1317 13TH TERR PALM BEACH GARDENS, FL 33418	1317 13TH TERR PALM BEACH GARDENS, FL 33418

03232005   No Chg-P   CR2E034 (10/03)

4. FEI Number 65-1080581	Applied For
	Not Applicable

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

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WHITING, SOPHIA
1317 13TH TERR
PALM BEACH GARDENS, FL 33418

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WHITING, SOPHIA
STREET ADDRESS	1317 13TH TERR
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418

TITLE	
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CITY-ST-ZIP	

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03/25/05-80021-002 150.00

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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 607, 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: _Sophia Whiting_   3-22-05   561-315-0716

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #