

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90693 001 *1,500.00

DOCUMENT # P01000094537

1. Entity Name

ADULT CARE OPERATING CORP.

Principal Place of Business

**311 PARK PLACE BLVD., STE. 225
 CLEARWATER FL 33759**

Mailing Address

**311 PARK PLACE BLVD., STE. 225
 CLEARWATER FL 33759**

2. Principal Place of Business

13777 Belcher Road
 Suite, Apt. #, etc.

3. Mailing Address

13777 Belcher Road
 Suite, Apt. #, etc.

City & State

Largo, FL

City & State

Largo, FL

4. FEI Number

59-3746747

Applied For

Not Applicable

Zip

33771

Country

US

Zip

33771

Country

US

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**LOMBARDI, RITA A
 311 PARK PLACE BLVD., STE. 225
 CLEARWATER FL 33759**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

13777 Belcher Road

City

Largo

FL

Zip Code
33771

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
 NAME **PIZAA, JOHN J SR**
 STREET ADDRESS **311 PARK PLACE BLVD., STE. 225**
 CITY-ST-ZIP **CLEARWATER FL 33759**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Director-President/Treasurer** ☐ Change ☒ Addition
 NAME **Piazza, John J., Sr.**
 STREET ADDRESS **13777 Belcher Road**
 CITY-ST-ZIP **Largo, FL 33771**

TITLE **Director-Vice President** ☐ Change ☒ Addition
 NAME **Rosemary E. Piazza**
 STREET ADDRESS **13777 Belcher Road**
 CITY-ST-ZIP **Largo, FL 33771**

TITLE **Secretary** ☐ Change ☒ Addition
 NAME **Rita A. Lombardi**
 STREET ADDRESS **13777 Belcher Road**
 CITY-ST-ZIP **Largo, FL 33771**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Rita A. Lombardi

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/02
 Date

727-726-3310
 Daytime Phone #

CR2E034 (9/01)