

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90174 017 ***158.75

DOCUMENT # P01000118262

1. Entity Name
HERE TO CARE, INC.



Principal Place of Business
WARRINGTON ENTERPRISES, INC.
5800 CLARK RD
SARASOTA FL 34233

Mailing Address
WARRINGTON ENTERPRISES, INC.
5800 CLARK RD
SARASOTA FL 34233



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1159153**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WARRINGTON, H MONROE
5800 CLARK RD
SARASOTA FL 34233

Name

Warrington, Jeffrey M.

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

5800 Clark Rd.

City

Sarasota

FL

Zip Code

34233

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, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete
NAME **WARRINGTON, JEFFREY M**
STREET ADDRESS **5800 CLARK RD**
CITY-ST-ZIP **SARASOTA FL 34233**

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

TITLE **DV** ☐ Delete
NAME **WARRINGTON, JASON H**
STREET ADDRESS **5800 CLARK RD**
CITY-ST-ZIP **SARASOTA DS 34233**

TITLE **V/S/D** ☒ Change ☐ Addition
NAME **Warrington, Jason H.**
STREET ADDRESS **5800 Clark Rd.**
CITY-ST-ZIP **Sarasota, FL 34233**

TITLE **DST** ☐ Delete
NAME **WARRINGTON, H MONROE**
STREET ADDRESS **5800 CLARK RD**
CITY-ST-ZIP **SARASOTA FL 34233**

TITLE **T/D** ☒ Change ☐ Addition
NAME **Warrington, H. Monroe**
STREET ADDRESS **5800 Clark Rd.**
CITY-ST-ZIP **Sarasota, FL 34233**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

SIGNATURE OF JEFFREY M. WARRINGTON
Jeffrey M. Warrington, President

2/03/03

Date

941-921-4441

Daytime Phone #

CR2E034 (10/02)