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FILED
Feb 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P34323

(6)

1. Corporation Name

GRISWOLD SPECIAL CARE, INC.

Principal Place of Business

Mailing Address

707 BETHLEHEM PIKE
ERDENHEIM PA 19038
US

707 BETHLEHEM PIKE
ERDENHEIM PA 19038
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/17/1991

2. Principal Place of Business

21 717 Bethlehem Pike

2a. Mailing Address

26 717 Bethlehem Pike

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 300

27 Suite 300

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

23-2506652

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HANEY, ABIGAIL
20-800 FLEMING STREET
KEY WEST FL 33040

81 Name

Sue Althof

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

12103 69th Avenue North

83

84 City

Seminole

FL

85 Zip Code

33772

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Suzanne H. Althof

SUZANNE H. ALTHOF

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan 20, 1998

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TD ☐ DELETE
NAME GRISWOLD, KENT C.
STREET ADDRESS 1211 EAST BUTLER PIKE
CITY-ST-ZIP AMBLER PA

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE PC ☐ DELETE
NAME GRISWOLD, KENT C.
STREET ADDRESS 1211 EAST BUTLER PIKE
CITY-ST-ZIP AMBLER PA

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE SV ☐ DELETE
NAME GRISWOLD, LINCOLN T.
STREET ADDRESS 707 A BETHLEHEM PIKE
CITY-ST-ZIP ERDENHEIM PA

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with a address.

CR2E034 (10/97)