

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 20 PM 2: 07

DOCUMENT # P93000054574 (7)

1. Corporation Name

SENIOR'S CHOICE, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business
13540 N. FLORIDA AVE
SUITE 203
TAMPA FL 33613
US

Mailing Address
601 DUQUE ROAD
LUTZ FL 33549

3. Date Incorporated or Qualified
08/02/1993

3a. Date of Last Report
04/27/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-3204997

Applied For
Not Applicable

22. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

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

23. City & State

28. City & State

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24. Zip

25. Country

29. Zip

30. Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PATE, LEROY L
601 DUQUE ROAD
LUTZ FL 33549

81. Name

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

83.

84. City

FL

85. Zip Code

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	WATSON, SCOTT B
STREET ADDRESS	17907 SINGING WOOD PL
CITY - ST - ZIP	LUTZ FL
TITLE	VD
NAME	PATE, LEROY L
STREET ADDRESS	601 DUQUE RD
CITY - ST - ZIP	LUTZ FL
TITLE	SD
NAME	PATE, ALICE S
STREET ADDRESS	601 DUQUE RD
CITY - ST - ZIP	LUTZ FL
TITLE	TD
NAME	WATSON, LYNNE P
STREET ADDRESS	17907 SINGING WOOD PL
CITY - ST - ZIP	LUTZ FL
TITLE	D
NAME	SCHWARTZ, BETH P
STREET ADDRESS	2951 ASPEN WOODS ENTRY
CITY - ST - ZIP	ATLANTA GA
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 149.02(9)(b), Florida Statutes. I further certify that the information included on this annual report or biennial 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 liquidator empowered to execute this report as required by Chapter 107, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Alice S. Pate, Sen.
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR
Alice S. Pate

3/24/95

(813)969-0884