

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90411 002 ***150.00

DOCUMENT # P93000088793

1. Entity Name
ADULT CARE MANAGEMENT CORPORATION



Principal Place of Business
**13777 BELCHER RD
LARGO, FL 33771 US**

Mailing Address
**13777 BELCHER RD
LARGO, FL 33771 US**

50008646



01182006 Chg-P CR2E034 (11/05)

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

City & State
Zip Country

4. FEI Number
59-3216444

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SOCKOL, DAVID J ESQ
111 SECOND AVE NE
PLAZA TOWER, SUITE 1404
SAINT PETERSBURG, FL 33701**

7. Name and Address of New Registered Agent

Name **JOHN J. PIAZZA, SR**
Street Address (P.O. Box Number is Not Acceptable)
13777 Belcher Rd. So.
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *John J. Piazza, Sr. Pres.* **1/18/06**
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, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	PIAZZA, JOHN J SR	
STREET ADDRESS	13777 BELCHER RD	
CITY-ST-ZIP	LARGO, FL 33771	
TITLE	S	<input type="checkbox"/> Delete
NAME	LOMBARDI, RITA A	
STREET ADDRESS	13777 BELCHER RD S.	
CITY-ST-ZIP	LARGO, FL 33771	
TITLE	VPT	<input type="checkbox"/> Delete
NAME	LENTINI, VINCENT J	
STREET ADDRESS	13777 BELCHER RD S.	
CITY-ST-ZIP	LARGO, FL 33771	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	PIAZZA, ROSEMARY E	
STREET ADDRESS	13777 BELCHER RD S.	
CITY-ST-ZIP	LARGO, FL 33771	
TITLE	VPF	<input type="checkbox"/> Delete
NAME	BARNES, TIM	
STREET ADDRESS	13777 BELCHER RD S	
CITY-ST-ZIP	LARGO, FL 33771	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *John J. Piazza SR* **1/18/06** **727-726-3310**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #