

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000021986 (2)

1. Corporation Name

HOME PATIENT CARE, INC. (TAMPA)

Principal Place of Business

510 THOMPSON CENTER
6304 BENJAMIN RD.
TAMPA FL 33634

Mailing Address

510 THOMPSON CENTER
6304 BENJAMIN RD.
TAMPA FL 33634



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

03/18/1994

3a. Date of Last Report

04/13/1995

4. FEI Number

59-3230532

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

9. Name and Address of Current Registered Agent

HOME PATIENT CARE, INC.
3901 SW 47 AVE
SUITE 405
FT LAUDERDALE FL 33314

10. Name and Address of New Registered Agent

81

Name

Karon Carpenter

82

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

3901 SW 47th Ave., Suite 405

83

84

City

Ft. Lauderdale

FL

85 Zip Code

33314

11. Pursuant to the provisions of Sections 607.082 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

Karon Carpenter

Karon Carpenter

4/11/96

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PD MIRRA, RAYMOND A
ONE HOOK RD
SHARON HILL PA ☐ DELETE

VP STEPANUK, KEVIN D
14 BIRCHALL DRIVE
HADDENFIELD NJ 08033 ☒ DELETE

S MOHNACS, JOHN P
4956 FITLER ST
PHILA PA ☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PD/D

☒ Change

☒ Addition

1.2 NAME

Mirra, Raymond A. Jr.

1.3 STREET ADDRESS

One Hook Road
Sharon Hill, PA 19079

1.4 CITY-ST-ZIP

☐ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

One Hook Road
Sharon Hill, PA 19079

☐ Change

☒ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

T
Battaglia, Victor
One Hook Road
Sharon Hill, PA 19079

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

600001786518

-04/19/96--01010--019

***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in the corporation or on an attachment with an address.

SIGNATURE:

John P. Mohnacs

John P. Mohnacs 3/20/96 610-586-8514

Date

Signature Printed

5/11/96

CR2E034 (12/95)