FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 8:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000024292 (2)**

1. Corporation Name
VIRGINIA'S COUNTRY MANOR, INC.

Principal Place of Business
1098 NE 45TH ST
FT LAUDERDALE FL 33334

Mailing Address
1098 NE 45TH ST
FT LAUDERDALE FL 33334

DO NOT WRITE IN THIS SPACE.

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: 03/25/1994
3a. Date of Last Report: N/A
4. FEI Number: 65-0530559 — 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
SCHMIDT, PETER H
400 S DIXIE HWY 420
BOCA RATON FL 33432

10. Name and Address of New Registered Agent
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 mandated) DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MILLER, VIRGINIA M
STREET ADDRESS	23265 LAGO MAR CIR
CITY - ST - ZIP	BOCA RATON FL 33433
TITLE	D
NAME	HOOD, PAMELA P
STREET ADDRESS	23265 LAGO MAR CIR
CITY - ST - ZIP	BOCA RATON FL 33433
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☑ Change ☐ Addition
1.2 NAME	Miller, Virginia	Deceased
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	President + director	☑ Change ☐ Addition
2.2 NAME	Hood, Pamela P.	Change of title
2.3 STREET ADDRESS	23265 Lago Mar Circle	
2.4 CITY - ST - ZIP	Boca Raton FL 33433	
3.1 TITLE	Director	☐ Change ☑ Addition
3.2 NAME	Schmidt, Peter H	
3.3 STREET ADDRESS	400 S. Dixie Highway #420	
3.4 CITY - ST - ZIP	Boca Raton, FL	
4.1 TITLE	Director	☐ Change ☑ Addition
4.2 NAME	Holl, Thomas	
4.3 STREET ADDRESS	231 S. La Salle Street	
4.4 CITY - ST - ZIP	Chicago, Ill. 60697	
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 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 if changed, or on an attachment with an address.

SIGNATURE: Pamela P. Hood
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pamela P. Hood President/director 4/24/95 305-271-6808
Title Daytime Phone #

0238304 CP