

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000051293

1. Entity Name

TENDERCARE ASSISTED LIVING, INC.

FILED

Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90079 019 ***150.00

Principal Place of Business

1320 S.E. FEDERAL HIGHWAY
SUITE 203
STUART FL 34994

Mailing Address

P.O. BOX 1862
STUART FL 34995-1862

2. Principal Place of Business

100 West 5th Street

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Stuart, FL

City & State

Zip

34994

Country

USA

Zip

Country

4. FEI Number 65-0503949

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional-
Fee Required

6. Name and Address of Current Registered Agent

BAKER, JEAN A
1320 S.E. FEDERAL HIGHWAY
SUITE #214
STUART FL 34994

7. Name and Address of New Registered Agent

Name

Jean A. Baker

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

100 West 5th Street

City

Stuart

FL

Zip Code

34994

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.

SIGNATURE

Jeanne Baker, President

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/9/01

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PST ☐ Delete
NAME BAKER, JEAN A
STREET ADDRESS 1320 S.E. FEDERAL HWY, SUITE 203
CITY-ST-ZIP STUART FL 34994

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 100 West 5th Street
CITY-ST-ZIP Stuart, FL 34994

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jeanne Baker Jean Anne Baker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/01

Date

(561) 220-3090

Daytime Phone #

CR2E034 (10/00)