

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000019286 (0)

1. Corporation Name

PALM TERRACE RESIDENT CARE CORPORATION



Principal Place of Business

15330 SHERWOOD FOREST DR
TAMPA FL 33647

Mailing Address

15330 SHERWOOD FOREST DR
TAMPA FL 33647

EFFECTIVE Nov 30, 1996

2. Principal Place of Business

2a. Mailing Address

21 5121 E. SERENA DR.

26 5121 E. SERENA DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 N/A.

27 N/A.

City & State

City & State

23 TAMPA FL.

28 TAMPA FL.

Zip

Zip

24 33617

Country

Country

25 HILLSBOROUGH

29 33617

30 HILLSBOROUGH

9. Name and Address of Current Registered Agent

CLEMENT, ROBERT T
15330 SHERWOOD FOREST DR
TAMPA FL 33647

3. Date Incorporated or Qualified
03/07/1995

3a. Date of Last Report

N/A (NEW)

4. FEI Number

59-3334110

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

10. Name and Address of New Registered Agent

81 Name ROBERT J. CLEMENT

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

5121 E SERENA DR.

83

84 City TAMPA

FL

85 Zip Code 33617

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

ROBERT J. CLEMENT

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

NOTE: Registered agent signature required when re-stating.

DATE

3/26/96

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME CLEMENT, ROBERT J
STREET ADDRESS 18421 AINTREE CT
CITY-ST-ZIP TAMPA FL 33647

TITLE VS ☐ DELETE

NAME CLEMENT, ROBERT T
STREET ADDRESS 15330 SHERWOOD FOREST DR
CITY-ST-ZIP TAMPA FL 33647

TITLE T ☐ DELETE

NAME CLEMENT, BRIAN R
STREET ADDRESS 126 BEVERLY RD
CITY-ST-ZIP WEST PALM BEACH FL 33405

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT J. CLEMENT

PRESIDENT

3/26/96

83-973-0075

CR2E034 (12/95)