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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000080583 (4) **DOCUMENT #**

MANATEE MENTAL HEALTH AND REHABILITATIVE SERVICE S, INC.

Principal Place of Business

Mailing Address



28 689 Deltona Blvd 28 689 Deltona Blvd 59-3344613	Applied For Not Applicable Additional Required May Be d to Fees
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9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GOETZ, GALEN 2415 S VOLUSIA AVE., #A4 ORANGE CITY FL 32783 13. Pursuant to the provisions of Societies 507.0522 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of clanging attemption or registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of clanging attemption with, and accept the obligations of, Societies 607.0505. Florida Statutes, the above named corporation submits this statement for the purpose of clanging attemption with, and accept the obligations of, Societies 607.0505. Florida Statutes SIGNATURE 10. Persuant to the provisions of Societies 507.0505. Florida Statutes, the above named corporation submits this statement for the purpose of clanging attemption with, and accept the obligations of, Societies 607.0505. Florida Statutes SIGNATURE 10. Persuant to the provisions of Societies 507.0505. Florida Statutes, the above named corporation submits this statement for the purpose of clanging attemption with, and accept the obligations of, Societies 607.0505. Florida Statutes SIGNATURE 11. IT III	199.032,
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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 eath, 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 13 if charged, or on an attachment with an address.

SIGNATURE:

4/12/96 407-860-0689

ADDENDUM

OFFICERS

Chief Executive Officer, Vice President, Chairman of the Board and Assistant Secretary:

W. Stewart Swain

6000 Market Square Court

Suite 200

Clemmons, North Carolina 27012

President, Vice President and Assistant Secretary:

Laverne P. Herzog 689 Deltona Blvd. Deltona, Florida 32725

Vice President of Operations:

Jewel Austin 2828 Winding Way Lilburn, Georgia 30247

Regional

Vice President:

Bruce Covell, Jr. 6655 Southwest 7th Margate, Florida 33068

Vice President, Director of Reimbursement, and Assistant

Secretary:

Troy Curry

600 Market Square Court

Suite 200

Clemmons, North Carolina 27012

Vice President, Treasurer, Chief Financial Officer and Assistant

Secretary:

Becky Muenchow

6000 Market Square Court

Suite 200

Clemmons, North Carolina 27012

Secretary:

Faye Hutchins

6000 Market Square Court

Suite 200

Clemmons, North Carolina 27012

Assistant Secretary:

Jo Ann Page 689 Deltona Blvd. Deltona, Florida 32725