FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600065457 (9)

FILED May 07 1998 8:00am Secretary of State

1. Corporation	SS CARE OF BELLEVIEW, I	NC.		\$ 1884 PAL IN 1510 SHILL BOND BAIL OF IN	NAKKA ANSER ANKAL AKSAR SANIK NAGE KARI
Principal Place of Business Mailing Address				I INTILOGE IEG INTILOGEN AREK ANDER SADIN E	tarit östöt öttir araat átter töðu sam
10341 S.E. HIGHWAY 441 BELLEVIEW FL 34420 BELLEVIEW FL 34420 BELLEVIEW FL 34420			DO NOT WRITE IN	THIS SDACE	
				3. Date Incorporated or Qualified	THIS SPACE
				08/01/1996	
2. Principal F	Place of Business	2a. Mailing Address	·	4. FEI Number	Applied For
21		26		59-3393178	Not Applicable
Suite, Apt.	. #, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State			
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid	
24	25	29	90	Personal Property Tax due June 30	
	g, Name and Address of Curren	t Registered Agent		10. Name and Address of New Regis	Itered Agent
M	EAD, ROBERT W JR		81 Name		
800 NORTH MAGNOLIA AVENUE			62 Street	Address (P.O. Box Number is Not Acceptable)	
SUITE 1500					
OF	RLANDO FL 32803		83		
			84 City		85 Zip Code
44 0	- Marie	Day 1 007 4500 Florida Cont			FL S 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.					
agent. La	am familiar with, and accept the obliga	itions of, Section 607.0505, Flori	ida Statutes.		
SIGNATURE	Signature, typed or profed name of registered ages	of and title if applicable	Registered Anent signature	required when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	CRIMI, MICHAEL JR		1.2 NAME		
STREET ADDRESS	10341 S.E. HIGHWAY 441		1.3 STREET ADDRESS		Į
CITY-ST-ZIP	BELLEVIEW FL 34420		1.4 CITY-ST-ZIP		
TITLE	D	⊠ DELETE	2.1 TALE		Change Addition
NAME	SCHIFFER, ROBERT P M.D.		2.2 NAME		ļ
STREET ADDRESS	10341 S.E. HIGHWAY 441		2.3 STREET ADDRESS		
CITY-ST-ZIP	BELLEVIEW FL 34420		2.4 CITY-ST-ZIP		
TITLE	D DOUBLE COANIC CAD	⊠ DELETE	3 1 TITLE		Change Addition
NAME	REISNER, FRANK F M.D. 10341 S.E. HIGHWAY 441		3.2 NAME		
STREET ADDRESS	BELLEVIEW FL 34420		3.3 STREET ADDRESS		
CITY-ST-ZIP	D DECLEMENT FE 34420	DELETE	3.4. CITY+ST-ZIP		Change Addition
TITLE NAME	HARPER, EILEEN E	N DETER	4. 2 NAME		C plante C wouldn't
STREET ADDRESS	10341 S.E. HIGHWAY 441		4.3 STREET ADDRESS		i
CITY-ST-ZIP	BELLEVIEW FL 34420		4.4 City-St-ZiP		1
TITLE		DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	1	<u>—</u>	5.2 NAME	DEANNA CRIMI	
STREET ADDRESS			5.3 STREET ADDRESS	10341 SE HIGHWAY 441	İ
CITY-ST-ZIP			5.4 CITY-ST-ZIP	BELLEVIEW, FL 3442	.0
TITLE		DELETE	61 TITLE		Change Addition
NAME			62 NAME		Ì
STREET ADDRESS			6.3 STREET ADDRESS		ĺ
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby	certify that the information supplied wi	th this filing does not qualify for	the exemption state	ed in Section 119.07(3)(i), Florida Statutes. I fur	ther certify that the information

4. 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 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 trusted 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:

LAW SO Crimo DEANNA CRIM

4/29/98

352-347-5225