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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P970000094583			
1. Corporation Name Geriatric Resources of Florida, Inc. 1200 S. Pine Island Road Plantation, Florida 33324			
Principal Place of Business 1200 S. Pine Island Road Plantation, Florida 33324		Mailing Address same	
2. Principal Place of Business 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country		3. Mailing Address 29 Suite, Apt. #, etc. 30 City & State 31 Zip 32 Country	
3. Name and Address of Current Registered Agent C T Corporation System 1200 South Pine Island Road Plantation, Florida 33324		4. Name and Address of New Registered Agent 81 Name n/a 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1606, 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 607.0806, Florida Statutes. SIGNATURE <u>Conny Bryan</u> Special Asst. Secy. 9/29/99 Signature typed or printed name of registered agent and file if applicable (NOTE: Registered agent signatures required upon resubmission)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE ☐ DELETE Stan Caummlisar President 2182 Kimbrough Woods Place Germantown, Tennessee 38139		1.1 TITLE ☐ Change ☒ Addition Vice President Kelly McBryde 2604 Arbor Way Hixson, Tennessee 37343	
1.2 NAME Brooks Ayers, Vice President 5195 Water Ridge Road Tupelo, MS 38139		1.2 NAME 300003001349 -09/30/99--01001--014 ****200.00 ****200.00	
1.3 STREET ADDRESS Roger Glass, Secretary 4520 Fire Pink Trail Chattanooga, Tennessee 37415		1.3 STREET ADDRESS 300003001349--5 -09/30/99--01001--015 ****\$550.00 ****\$550.00	
1.4 CITY-ST-ZIP 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		1.4 CITY-ST-ZIP 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
1.5 CITY-ST-ZIP 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		1.5 CITY-ST-ZIP 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
1.6 CITY-ST-ZIP 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		1.6 CITY-ST-ZIP 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 18.07(3)(f), 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, with all other like empowered.

SIGNATURE:

RENEWALS AND TYPES ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/27/99

8. PAYNE SEP 30 1999

888 3009966

Date

Daytime Phone

CRZE004 (1/99)



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CORPORATION NAME(S) AND DOCUMENT NUMBER(S) (if known):

Geriatric Resources of Florida Inc.

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☐ Pick Up Time

☐ Certified Copy

☐ Mail Out

☐ Certificate of Status

☐ Will Wait

☐ Certificate of Good Standing

☐ Photocopy

☐ ARTICLES ONLY

☐ ALL CHARTER DOCS

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A. Officer/Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☒	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION/QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

☐ Certificate of FICTITIOUS NAME

☐ FICTITIOUS NAME SEARCH

☐ CORP SEARCH

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Ordered By: _____

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