

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000098437

FILED
Jan 07, 2011
Secretary of State

Entity Name: OCALA GERIATRIC SERVICES, INC.

Current Principal Place of Business:

120 NE 50TH AVE
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

120 NE 50TH AVE
OCALA, FL 34470

New Mailing Address:

FEI Number: 59-3482964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHERRY, TERESA A
120 N.E. 50TH AVE.
OCALA, FL 34470 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: KITOS, ROBERT J
Address: 10119 N.W. 60TH AVE.
City-St-Zip: OCALA, FL 34482

Title: D
Name: RICK, LARRY F
Address: 3424 NW 37TH AVE.
City-St-Zip: GAINESVILLE, FL 32605

Title: P/D
Name: CLEVINGER, SIDNEY E
Address: 2415 SE 17TH ST
City-St-Zip: OCALA, FL 34471

Title: S/D
Name: CHERRY, TERESA A
Address: 120 N.E. 50TH AVE.
City-St-Zip: OCALA, FL 34470

Title: D
Name: UMANA, GABRIEL
Address: 2560 SE 17TH STREET
City-St-Zip: OCALA, FL 34471

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: TERESA A CHERRY

S/D

01/07/2011

Electronic Signature of Signing Officer or Director

Date