

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90693 001 *1,500.00

0455100 AV

DOCUMENT # P99000046933

1. Entity Name

ADULT CARE HOLDING CORP.

Principal Place of Business

**311 PARK PLACE BLVD
 STE 225
 CLEARWATER FL 33759
 US**

Mailing Address

**311 PARK PLACE BLVD
 STE 225
 CLEARWATER FL 33759
 US**

2. Principal Place of Business

13777 Belcher Road

Suite, Apt. #, etc.

3. Mailing Address

13777 Belcher Road

Suite, Apt. #, etc.

City & State

Largo, FL

Zip

33771

Country

US

City & State

Largo, FL

Zip

33771

Country

US

4. FEI Number

59-3582877

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**PIAZZA, JOHN J SR.
 311 PARK PLACE BLVD
 STE 225
 CLEARWATER FL 33759**

7. Name and Address of New Registered Agent

Name

Rita A. Lombardi

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

13777 Belcher Road

City

Largo

FL

Zip Code

33771

8. 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 **X Rita A. Lombardi**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/18/02

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **PIAZZA, JOHN J SR.**
 STREET ADDRESS **311 PARK PLACE BLVD STE 225**
 CITY-ST-ZIP **CLEARWATER FL 33759**

TITLE **S** ☐ Delete
 NAME **LOMBARDI, RITA A**
 STREET ADDRESS **311 PARK PLACE BLVD STE 225**
 CITY-ST-ZIP **CLEARWATER FL 33759**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☒ Addition
 NAME **Director-President**
 STREET ADDRESS **Piazza, John J. Sr.**
 CITY-ST-ZIP **13777 Belcher Road**
Largo, FL 33771

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **13777 Belcher Road**
 CITY-ST-ZIP **Largo, FL 33771**

TITLE ☐ Change ☒ Addition
 NAME **Director-Vice President**
 STREET ADDRESS **Piazza, Rosemary E.**
 CITY-ST-ZIP **13777 Belcher Road**
Largo, FL 33771

TITLE ☐ Change ☒ Addition
 NAME **Vice President-Treasurer**
 STREET ADDRESS **Lentini, Vincent J.**
 CITY-ST-ZIP **13777 Belcher Road**
Largo, FL 33771

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **X Rita A. Lombardi**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/18/02

Daytime Phone #

727-726-3310

CR2E034 (9/01)