

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000052645

1. Entity Name

THERACARE HOME CARE AND COMPANION SERVICES INC.

**FILED**  
**Jan 19, 2000 8:00 am**  
**Secretary of State**

01-19-2000 90185 019 \*\*\*150.00

Principal Place of Business

4301 32ND ST. WEST, SUITE E-4  
BRADENTON FL 34205

Mailing Address

4301 32ND ST. WEST, SUITE E-4  
BRADENTON FL 34205-2700

2. Principal Place of Business

5815 38th Ave E

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Bradenton FL

City & State

4. FEI Number

450927559

Applied For

Not Applicable

Zip

34208

Country

Man

Zip

Country

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOTTSCHKE, LINDA L  
4301 32ND ST. WEST, SUITE E-4  
BRADENTON FL 34205

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVST  
NAME GOTTSCHKE, LINDA L  
STREET ADDRESS 5815 38TH AVE. EAST  
CITY-ST-ZIP BRADENTON FL 34208

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME GOTTSCHKE, LINDA L  
STREET ADDRESS 5815 38TH AVE. EAST  
CITY-ST-ZIP BRADENTON FL 34208

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME WATKINS, GEORGE  
STREET ADDRESS 5815 38TH AVE. EAST  
CITY-ST-ZIP BRADENTON FL 34208

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME GOTTSCHKE, GAYLE C  
STREET ADDRESS 4301 32ND ST. WEST, SUITE E-4  
CITY-ST-ZIP BRADENTON FL 34205

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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:

Linda L. Gottschke President 1/12/2000 941 747-6999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)