

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# S36856

FILED
Jan 21, 2002 8:00 AM
Secretary of State

Entity Name: CONSERVCARE, INC.

Current Principal Place of Business:

3056 MERCY DRIVE
ORLANDO, FL 32808 US

Current Mailing Address:

P.O. BOX 585967
ORLANDO, FL 32858 US

New Principal Place of Business:

1180 CELEBRATION BLVD.
SUITE 102
CELEBRATION, FL 34747 US

New Mailing Address:

1180 CELEBRATION BLVD.
SUITE 102
CELEBRATION, FL 34747 US

FEI Number: 59-3051846

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LESTER, MICHELE
3056 MERCY DR
ORLANDO, FL 32808 US

Name and Address of New Registered Agent:

LESTER, MICHELE
1180 CELEBRATION BLVD.
SUITE 102
CELEBRATION, FL 34747 US

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:

01/21/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: LESTER, MICHELE
Address: 3056 MERCY DRIVE
City-St-Zip: ORLANDO, FL

Title: VTD () Delete
Name: LESTER, BRUCE A.
Address: 3056 MERCY DRIVE
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: LESTER, MICHELE
Address: 1180 CELEBRATION BLVD., # 102
City-St-Zip: CELEBRATION, FL 34747 US

Title: VTD (X) Change () Addition
Name: LESTER, BRUCE A.
Address: 1180 CELEBRATION BLVD., # 102
City-St-Zip: CELEBRATION, FL 34747 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MICHELE LESTER

PSD

01/21/2002

Electronic Signature of Signing Officer or Director

Date