

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V17242** (1)

1. Corporation Name

TARVER'S HOME CARE, INC.

Principal Place of Business

Mailing Address

**102 CAMP CREEK RD. S.
PANAMA CITY BEACH FL 32413
US**

**102 CAMP CREEK RD. S.
PANAMA CITY BCH. FL 32413
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

**TARVER, LINDA F.
11212 FRONT BEACH RD.
PANAMA CITY BEACH FL 32407**

81 Name

82 Street Address (P.O. Box Numbers Not Acceptable)

83

84 City

FL 85 Zip Code

3. Date Incorporated or Organized

02/26/1992

3a. Date of Last Report

05/01/1995

4. FID Number

59-3103382

Applied For
Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered officer 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 607.0505, Florida Statutes.

SIGNATURE

Signature type (Corporate officer, registered agent, or director)

Signature type (Agent, authorized officer, or director)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	D	☐ DELETE
2. NAME	TARVER, JOSEPH C	
3. STREET ADDRESS	102 CAMP CREEK RD. S.	
4. CITY-ST-ZIP	PANAMA CITY BEACH FL	
5. TITLE	D	☐ DELETE
6. NAME	TARVER, LINDA F	
7. STREET ADDRESS	102 CAMP CREEK RD. S.	
8. CITY-ST-ZIP	PANAMA CITY BEACH FL	
9. TITLE		☐ DELETE
10. NAME		
11. STREET ADDRESS		
12. CITY-ST-ZIP		
13. TITLE		☐ DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY-ST-ZIP		
17. TITLE		☐ DELETE
18. NAME		
19. STREET ADDRESS		
20. CITY-ST-ZIP		
21. TITLE		☐ DELETE
22. NAME		
23. STREET ADDRESS		
24. CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Add
2. NAME	
3. STREET ADDRESS	
4. CITY-ST-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-ST-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-ST-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-ST-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-ST-ZIP	
21. TITLE	☐ Change ☐ Addition
22. NAME	
23. STREET ADDRESS	
24. CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Linda F. Tarver*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-23-96 904-231-5295
Date of Filing

CR2E034 (12/95)