

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 17 1997 8:00am  
Secretary of StatePROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # V72115

(1)

1. Corporation Name  
REGENCY MANOR, INC.

Principal Place of Business

252 U.S. HWY 17  
EAGLE LAKE FL 33839  
US

Mailing Address

1255 12TH STREET NORTH  
EAGLE LAKE FL 33839-3029  
US

3. Date Incorporated or Qualified

10/19/1992

3a. Date of Last Report

01/17/1996

4. FEI Number

59-3159241

Applied For

Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 252 U.S. Hwy 17 / So. 5th St

Suite, Apt. #, etc.

22

City &amp; State

23 EAGLE LAKE, FL

Zip

24 33839

Country

25 Polk

2a. Mailing Address

26 1255 12th St. N.

Suite, Apt. #, etc.

27

City &amp; State

28 EAGLE LAKE, FL

Zip

29 33839

Country

30 Polk

9. Name and Address of Current Registered Agent

MCGOVERN, ANNE V  
1255 12TH STREET  
EAGLE LAKE FL 33839

10. Name and Address of New Registered Agent

81 Name

Same as current

82

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

83

84 City

FL

85

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DVPS ☐ DELETENAME MCGOVERN, ANNE  
STREET ADDRESS 1255 12TH ST.  
CITY - ST - ZIP EAGLE LAKE FLTITLE PTD ☐ DELETENAME SMITH, ARLEY R  
STREET ADDRESS 480 BINGHAM DRIVE  
CITY - ST - ZIP EAGLE LAKE FL 33839TITLE ☐ DELETENAME  
STREET ADDRESS  
CITY - ST - ZIPTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY - ST - ZIPTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY - ST - ZIPTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 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:

ANNE V. MCGOVERN  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTORANNE V. MCGOVERN 1-10-97 941  
293-9911

Date

Daytime Phone #

0323578

CR2E034 (9/96)