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

PROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 MAR -8 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V72254

1. Corporation Name

Mary Wilkins Group Home, Inc.

Principal Place of Business / Mailing Address

455 Restwood Ave, Bartow, Fl.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2. Principal Place of Business	2a. Mailing Address
21 455 Restwood Ave.	26 455 Restwood Ave.
Suite, Apt #, etc 22	Suite, Apt #, etc 27
City & State 23 Bartow, Fl. 33830	City & State 28 Bartow, Fl. 33830
Zip 24 33830 Country 25 Polk	Zip 29 33830 Country 30 Polk

4. FEI Number 59-3158744 [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired X [ ] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax [ ] Yes [X] No

9. Name and Address of Current Registered Agent

Mary L.wilkins
455 Restwood Ave.
Bartow, Fl. 33830

10. Name and Address of New Registered Agent

81 Name
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			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mary L. Wilkinss 455 Restwood Ave. Bartow, Fl. 33830	[ ] DELETE	1 TITLE Dir.	[ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Martha Walker 455 Restwood Ave. Bartow, Fl. 33830	[ ] DELETE	2 TITLE Ass. Dir.	[ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mary A. Walker 455 Restwood Ave. Bartow, Fl. 33830	[ ] DELETE	3 TITLE Secretary	[ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE	4 TITLE	[ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE	5 TITLE	[ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE	6 TITLE	[ ] Change

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****158.75 ****158.75

KP 3/8/99

CR2E034 (11/98)

14. 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 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, with all other like empowered.

SIGNATURE: Mary A Walker 2-22-99 941-533-5500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE