

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41822

Entity Name: ELDER CARE OF ALACHUA COUNTY, INC.**Current Principal Place of Business:**5701 NW 34TH BLVD.
GAINESVILLE, FL 32653**Current Mailing Address:**P. O. BOX 100303
GAINESVILLE, FL 32610 US**FEI Number:** 59-3051104**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCDOWELL, LAWRENCE
3007 SW WILLISTON RD
SUITE 1120
GAINESVILLE, FL 32608 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:** LAWRENCE MCDOWELL

04/22/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | |
|-----------------|--------------------------------|
| Title | T |
| Name | THORNTON, ROBERT |
| Address | 1329 SW 16TH STREET/BOX 100336 |
| City-State-Zip: | GAINESVILLE FL 32610 |

| | |
|-----------------|------------------------|
| Title | C, D |
| Name | HOLT, JOCELYN |
| Address | 1035 N. W. 57TH STREET |
| City-State-Zip: | GAINESVILLE FL 32605 |

| | |
|-----------------|----------------------|
| Title | VC, D |
| Name | BENTON, JERRY |
| Address | P. O. BOX 147029 |
| City-State-Zip: | GAINESVILLE FL 32614 |

| | |
|-----------------|-----------------------|
| Title | D |
| Name | TONEY, A. SCOTT |
| Address | 925-B NW 56TH TERRACE |
| City-State-Zip: | GAINESVILLE FL 32605 |

| | |
|-----------------|-------------------------|
| Title | D |
| Name | HERSEY, TONI |
| Address | 16100 SW COUNTY ROAD 18 |
| City-State-Zip: | BROOKER FL 32622 |

| | |
|-----------------|-----------------------|
| Title | D |
| Name | CRUZ-ALMEIDA, YENISEL |
| Address | 2004 MOWRY ROAD |
| City-State-Zip: | GAINESVILLE FL 32611 |

| | |
|-----------------|--------------------------------|
| Title | D |
| Name | BAKER, RYAN |
| Address | 4340 W. NEWBERRY RD. SUITE 301 |
| City-State-Zip: | GAINESVILLE FL 32607 |

| | |
|-----------------|-------------------------------|
| Title | D |
| Name | TRELLA, ALENA |
| Address | 2205 NW 40TH TERRACE, SUITE B |
| City-State-Zip: | GAINESVILLE FL 32605 |

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS WILLIAM YOUNG**SECRETARY**

04/22/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name BRUNNER, RUTH
Address 3605 NW 83RD STREET
City-State-Zip: GAINESVILLE FL 32607

Title D
Name MURPHY, JAKE
Address 4140 NW 37 PLACE
SUITE B
City-State-Zip: GAINESVILLE FL 32606

Title D
Name CATALANOTTO, REBECCA
Address 8000 NW 27TH BLVD.
City-State-Zip: GAINESVILLE FL 32606

Title S
Name YOUNG, THOMAS WILLIAM
Address P. O. BOX 100327
City-State-Zip: GAINESVILLE FL 32610

Title D
Name POPE, BRENTLY PRESTON
Address 214 W. UNIVERSITY AVE, STE A1
City-State-Zip: GAINESVILLE FL 32601

Title D
Name DODD, BELENA TERRY
Address 4011 NW 43RD STREET
City-State-Zip: GAINESVILLE FL 32606

Title D
Name JONES, FRANK
Address 18815 NW 115 AVE
City-State-Zip: ALACHUA FL 32615

Title D
Name EALY, KACY
Address 5701 NW 34TH BLVD.
City-State-Zip: GAINESVILLE FL 32653

Title D
Name DOLAN, MARIE
Address 10900 SW 24TH AVE
City-State-Zip: GAINESVILLE FL 32607

Title D
Name GOODMAN, JODIE
Address 4200 NW 90TH BLVD
City-State-Zip: GAINESVILLE FL 32606

Title D
Name RAMOS, CHRISTINA
Address 4051 NW 43RD STREET, SUITE 37
City-State-Zip: GAINESVILLE FL 32606