

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006420

Entity Name: ELEOS-THE CARE NETWORK, INC.**Current Principal Place of Business:**1067 WOODSON HAMMOCK CIRCLE
WINTER GARDEN, FL 34787**Current Mailing Address:**PO BOX 770607
WINTER GARDEN, FL 34777 US**FEI Number:** 59-3530423**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HUKILL, JIM
1067 WOODSON HAMMOCK CR
WINTER GARDEN, FL 34787 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title ED
Name HUKILL, JIM
Address 1067 WOODSON HAMMOCK CR.
City-State-Zip: WINTER GARDEN FL 34787

Title D
Name PENNY, HARRISON
Address 1137 HUGO DRIVE
City-State-Zip: SALISBURY NC 28146

Title DIRECTOR
Name ALLEN, GINGER
Address 2125 TALL OAKS DR
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR
Name PHILLIPS, TERRANCE
Address 2735 GRASSMOOR LOOP
City-State-Zip: APOPKA FL 32712

Title S
Name HUKILL, RHONETTE
Address 1067 WOODSON HAMMOCK CR.
City-State-Zip: WINTER GARDEN FL 34787

Title D
Name FEHNEL, TOM
Address 772 BEAR CREEK CIRCLE
City-State-Zip: WINTER SPRINGS FL 32708

Title DIRECTOR
Name GANLEY, JOE
Address 810 DEER WOODS RD
City-State-Zip: CELEBRATION FL 34747

Title DIRECTOR
Name LORE, GINGER
Address 20 S. MAIN, SUITE 220
City-State-Zip: WINTER GARDEN FL 34787

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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: RHONETTE HUKILL**SECRETARY****02/01/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	PRESIDENT
Name	GRIFFITH, SHANNON
Address	15034 SAWGRASS BLUFF DRIVE
City-State-Zip:	WINTER GARDEN FL 34787