

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S69340

**Entity Name:** RES-CARE FLORIDA, INC.

**Current Principal Place of Business:**

9901 LINN STATION RD  
LOUISVILLE, KY 40223

**Current Mailing Address:**

9901 LYNN STATION RD  
LOUISVILLE, KY 40223 US

**FEI Number:** 61-1204314

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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 S  
Name WASKEY, DAVID S  
Address 9901 LINN STATION RD LOUISVILLE  
KY 40223 L  
City-State-Zip: LOUISVILLE KY 40223

Title D  
Name REIBEL, MICHAEL  
Address 9901 LINN STATION RD LOUISVILLE  
KY 40223 L  
City-State-Zip: LOUISVILLE KY 40223

Title T  
Name DAVISON, D. ROSS  
Address 9901 LINN STATION ROAD  
LOUISVILLE KY 40223  
City-State-Zip: LOUISVILLE KY 40223

Title P  
Name KELLEY, PATRICK  
Address 9901 LINN STATION RD LOUISVILLE  
KY 40223 L  
City-State-Zip: LOUISVILLE KY 40223

Title D  
Name DAVISON, D. ROSS  
Address 9901 LINN STATION ROAD  
LOUISVILLE KY 40223  
City-State-Zip: LOUISVILLE KY 40223

Title D  
Name KELLEY, PATRICK  
Address 9901 LINN STATION ROAD  
City-State-Zip: LOUISVILLE KY 40223

Title DIRECTOR  
Name WASKEY, DAVID S  
Address 9901 LINN STATION ROAD  
City-State-Zip: LOUISVILLE KY 40223

Title DIRECTOR  
Name STEPHEN, BRUNET  
Address 9901 LINN STATION ROAD  
City-State-Zip: LOUISVILLE KY 40223

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

**SIGNATURE:** DAVID S. WASKEY

**SECRETARY/DIRECTOR**

**01/18/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date