

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004723

FILED
Mar 04, 2010
Secretary of State

Entity Name: COMPREHENSIVE COMMUNITY CARE NETWORK, INC.

Current Principal Place of Business:

2330 SOUTH CONGRESS AVENUE
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

Current Mailing Address:

2330 SOUTH CONGRESS AVENUE
WEST PALM BEACH, FL 33406 US

New Mailing Address:

FEI Number: 54-2083748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEED, LARRY
2330 SOUTH CONGRESS AVENUE
WEST PALM BEACH, FL 33406 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: CALHOUN, MICHAEL J MR.
Address: 415 NORTH L STREET
City-St-Zip: LAKE WORTH, FL 33460 US

Title: D
Name: CALLAHAN, CARMEN MS.
Address: 2158 POLO GARDENS DR.
City-St-Zip: WELLINGTON, FL 33463 US

Title: SD
Name: ALEXANDRE, WEDLER A DR.
Address: 444 WEST BOYNTON BEACH BLVD
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: DV
Name: ARNOLD, CLAIRE J MS.
Address: 31 WEST CYPRESS ROAD
City-St-Zip: LAKE WORTH, FL 33467 US

Title: TD
Name: BRANDENBURG, CLEMENT C MR.
Address: 15132 82ND TERRACE N.
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: D
Name: COLLINS, JAMES L MR.
Address: 125 CHILEAN AVE
City-St-Zip: PALM BEACH, FL 33480

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: MICHAEL CALHOUN

P

03/04/2010

Electronic Signature of Signing Officer or Director

Date



Comprehensive Community Care Network

N02000004723
3-4-10

March 8, 2010

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

RE: Document N02000004723

Dear Sir or Madam:

We filed our annual report online on March 4, 2010 and included six (6) board of directors, the three (3) names below also serve on the board in the capacity of director:

Ken Druskin
525 South Flagler Drive #12A
West Palm Beach, FL 33401

Gary Richie
17334 W. Sycamore Dr.
Loxahatchee, FL 33470

Paul E. Gordon
2804 Eagle Circle # 806
West Palm Beach, FL 33411

Thank you for adding these names to our corporate database.

Sincerely,

A handwritten signature in cursive script that reads "Ron Vosatka".

Ron Vosatka, MS, MBA
Administrative Services Manager

For Michael J. Calhoun, President