

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004010

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** CARES SUICIDE PREVENTION, INC.

**Current Principal Place of Business:**

6314 CORPORATE COURT  
SUITE 100  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

6314 CORPORATE COURT  
SUITE 100  
FORT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 20-4679724      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CERVASIO, VIRGINIA  
1125 SE 22 ST.  
CAPE CORAL, FL 33990      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: P  
Name: CHANDO, JOANNE  
Address: 6900-29 DANIELS PKWY, PMB 188  
City-St-Zip: FORT MYERS, FL 33912

Title: VP  
Name: MITTON, DANIEL  
Address: 2231 MCGREGOR BLVD  
City-St-Zip: FORT MYERS, FL 33901

Title: SEC  
Name: RAINWATER, MANDIE  
Address: 2202 SW 12TH PLACE  
City-St-Zip: CAPE CORAL, FL 33991

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: VIRGINIA CERVASIO

DIR

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date