

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007298

FILED  
Apr 27, 2012  
Secretary of State

Entity Name: FANATCHICKS CARE, INC.

**Current Principal Place of Business:**

8131 VINELAND AVENUE  
SUITE 144  
ORLANDO, FL 32821 US

**New Principal Place of Business:**

**Current Mailing Address:**

8131 VINELAND AVENUE  
SUITE 144  
ORLANDO, FL 32821 US

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

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

THE MILE GROUP, LLC  
8131 VINELAND AVENUE  
SUITE 144  
ORLANDO, FL 32821 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: WATSON, LESLEY  
Address: 8131 VINELAND AVENUE, SUITE 144  
City-St-Zip: ORLANDO, FL 32821 US

Title: T  
Name: GASTON, TIFFANY  
Address: 4711 WEST ADAMS  
City-St-Zip: CHICAGO, IL 60644 US

Title: S  
Name: ANDERSON, KATRINA  
Address: 9312 63RD ST  
City-St-Zip: KENOSHA, WI 53142

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: LESLEY WATSON

P

04/27/2012

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

\_\_\_\_\_  
Date