

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726520

Entity Name: GUIDANCE/CARE CENTER, INC.**Current Principal Place of Business:**3000 41ST STREET OCEAN
MARATHON, FL 33050**Current Mailing Address:**1711 WHITNEY MESA DRIVE
HENDERSON, NV 89014 US**FEI Number:** 59-1458324**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BUSINESS FILINGS INCORPORATED
1200 SOUTH 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	DIRECTOR
Name	WALKER, EUGENE DR.
Address	5191 ROCK SPRING ROAD
City-State-Zip:	LITHONIA GA 30038
Title	PRESIDENT, DIRECTOR, CEO
Name	STEINBERG, RICHARD E
Address	1711 WHITNEY MESA DRIVE
City-State-Zip:	HENDERSON NV 89014
Title	TREASURER
Name	STILES, TINA
Address	1711 WHITNEY MESA DRIVE
City-State-Zip:	HENDERSON NV 89014
Title	CHAIRMAN
Name	RAMSAY, RICHARD
Address	C/O MONROE COUNTY SHERIFF'S OFFICE 5525 COLLEGE ROAD
City-State-Zip:	KEY WEST FL 33040

Title	DIRECTOR
Name	BAIRD, BILL III
Address	PO BOX 351
City-State-Zip:	PIKEVILLE KY 41502
Title	DIRECTOR
Name	YOUNGQUIST, DAVID
Address	21 SOUTH LONG LAKE TRAIL
City-State-Zip:	NORTH OAKS MN 55127
Title	SECRETARY
Name	HANNA, JIM
Address	1711 WHITNEY MESA DRIVE
City-State-Zip:	HENDERSON NV 89014
Title	DIRECTOR
Name	COGGS, SENATOR SPENCER
Address	CITY HALL, ROOM 103 200 EAST WELLS STREET
City-State-Zip:	MILWAUKEE WI 53202

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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: TINA STILES**TREASURER****02/05/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WALSH, THOMAS II
Address 180 28TH AVENUE NORTH
City-State-Zip: ST. PETERSBURG FL 33704

Title DIRECTOR
Name JOHNSON, RUSSELL
Address DISTRICT AG, 9TH JUDICIAL DISTRICT
1008 BRADFORD WAY
City-State-Zip: KINGSTON TN 37763

Title DIRECTOR
Name SZEGEDY-MASZAK, PETER
Address 5050 MAC ARTHUR BLVD., NW
City-State-Zip: WASHINGTON DC 20016

Title DIRECTOR
Name RODRIGUEZ, JESUS
Address PO BOX 4960, PMB 241
City-State-Zip: CAGUAS PR 00726-4969