

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 737797

**Entity Name:** CIRCLES OF CARE, INC.

**Current Principal Place of Business:**

400 EAST SHERIDAN ROAD  
MELBOURNE, FL 32901

**Current Mailing Address:**

400 EAST SHERIDAN ROAD  
MELBOURNE, FL 32901

**FEI Number:** 59-1101553

**Certificate of Status Desired:** Yes

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

LORD, STEPHEN L  
400 EAST SHERIDAN ROAD  
MELBOURNE, FL 32901 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:** STEPHEN L. LORD

07/07/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name HARRIS, DEWEY  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title SECRETARY  
Name LORD, STEPHEN L  
Address 400 E. SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name ALLENDER, JERRY W.  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name JACKSON, NEIL M  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title PRESIDENT  
Name LORD, STEPHEN L  
Address 400 E.SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title D  
Name FETTROW, BRENDA  
Address 65 STONE STREET  
City-State-Zip: COCOA FL 32922

Title DIRECTOR  
Name HESHMATI, HEIDAR PHD  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name JONES-FRANCEY, DARCIA  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

**Continues on page 2**

*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:** STEPHEN L LORD

PRESIDENT

07/07/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name LIGHTLE, BRIAN L  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name ROBERTS, CHARLES J  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name IVEY, ROBERT W  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title TREASURER  
Name VINTROUX, WILLIAM  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name PICKETT, ANDREW  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name LUKE, MIORELLI  
Address 400 E. SHERIDAN RD.  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name CORNELL, ROBIN M.L.  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name RUSSEL, TODD  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title CHAIRMAN  
Name MASSON, JACK S  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name SALONEN, ROBERT E  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name WIDERMANN, SCOTT  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name GLOVER, BENJAMIN  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR PURCHASING OFFICER  
Name WATERS, JR., RICHARD  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name KRUPP, AMY J.  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR  
Name BOYD, MARK J.  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901

Title VP  
Name DIX, TONYA  
Address 400 EAST SHERIDAN ROAD  
City-State-Zip: MELBOURNE FL 32901