

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770747

Entity Name: CARE RESOURCE COMMUNITY HEALTH CENTERS
INCORPORATED**Current Principal Place of Business:**3510 BISCAYNE BLVD.
MIAMI, FL 33137**Current Mailing Address:**3510 BISCAYNE BLVD.
SUITE 300
MIAMI, FL 33137 US**FEI Number: 59-2564198****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BESKIN, JAY
3109 STIRLING ROAD - STE. 101
FORT LAUDERDALE, FL 33312 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:** JAY BESKIN**01/22/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	CORBETT, RUSSELL
Address	1780 N.E. 137 TERRACE
City-State-Zip:	NORTH MIAMI FL 33181

Title	CEO
Name	SICLARI, RICHARD JR.
Address	3510 BISCAYNE BLVD., SUITE 300
City-State-Zip:	MIAMI FL 33137

Title	SECRETARY
Name	FALCON, DAN
Address	6061 COLLINS AVE. #8B
City-State-Zip:	MIAMI BEACH FL 33140

Title	TREASURER
Name	BESKIN, JAY
Address	3530 MYSTIC POINTE 311
City-State-Zip:	AVENTURA FL 33180

Title	VP
Name	CASTRATARO, GEORGE
Address	707 NE 3RD AVENUE 3RD FLOOR
City-State-Zip:	FT. LAUDERDALE FL 33304

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: RICHARD SICLARI**CEO****01/22/2018**

Electronic Signature of Signing Officer/Director Detail

Date