## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009786

Entity Name: LIFE CARE FOUNDATION, INC.

**FILED** Apr 16, 2013 **Secretary of State** CC3489909210

## **Current Principal Place of Business:**

401 WEST ATLANTIC AVE SUITE O-11 DELRAY BEACH, FL 33334

## **Current Mailing Address:**

333 CAMINO GARDENS BLVD BOCA RATON, FL 33432

FEI Number: 90-0125492 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DOGAN M. BENGISU, P.A. 401 W. ATLANTIC AVE. SUITE O-11 DELRAY BEACH, FL 33444 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:

Date

Officer/Director Detail:

Title Title D. P

Electronic Signature of Registered Agent

WESTPHAL, DAN DR BENGISU, DOGAN ESQ Name Name

5000 WEST OAKLAND PARK BLVD 333 CAMINO GARDENS BLVD Address Address

City-State-Zip: OAKLAND PARK FL 33133 City-State-Zip: BOCA RATON FL 33432

Title Title D D

Name JACOBSEN, LIA Name BADILLO, TERESA

Address 3801 CONNECTICUT AVE NW 12280 ST. SIMON DR. Address City-State-Zip: WASHINGTON DC 20008 City-State-Zip:

BOCA RATON FL 33428

Title D

Name CHANDRASEKHAR, RAJ Address 975 SW 9TH TERRACE City-State-Zip: BOCA RATON FL 33486

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: DOGAN BENGISU

Electronic Signature of Signing Officer/Director Detail

**BOARD CHAIRMAN** 

04/16/2013