

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000006934

Entity Name: CARING CAPS INC.

Current Principal Place of Business:

985 PEACHLAND AVE NE
PALM BAY, FL 32907

Current Mailing Address:

985 PEACHLAND AVE NE
PALM BAY, FL 32907 US

FEI Number: 46-0632245

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARTON, NATALIE E
985 PEACHLAND AVE NE
PALM BAY, FL 32907 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 PRESIDENT, CHAIRMAN
Name BARTON, NATALIE E
Address 985 PEACHLAND AVE NE
City-State-Zip: PALM BAY FL 32907

Title OFFICER
Name FINNK, BRIANNA
Address 985 PEACHLAND AVE NE
City-State-Zip: PALM BAY FL 32907

Title OFFICER
Name DRUMMOND, JEREMY
Address 2981 DENVER AVE SE
City-State-Zip: PALM BAY FL 32909

Title OFFICER
Name CUNDIFF, MEGAN
Address 515 BALCOM TERRACE
City-State-Zip: PALM BAY FL 32909

Title VP, VC
Name CAMPIONE, KATHERINE
Address 985 PEACHLAND AVE NE
City-State-Zip: PALM BAY FL 32907

Title OFFICER
Name SANCHEZ, JESUS
Address 902 ULSTER AVE
City-State-Zip: PALM BAY FL 32909

Title OFFICER
Name LIDE, LAUREN
Address 270 NAYLOR ST NE
City-State-Zip: PALM BAY FL 32907

Title OFFICER
Name GOLD, MONICA
Address 985 PEACHLAND AVE NE
City-State-Zip: PALM BAY FL 32907

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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: NATALIE BARTON

PRESIDENT

02/27/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OFFICER
Name PEEBLES, RACHEL
Address 985 PEACHLAND AVE NE
City-State-Zip: PALM BAY FL 32907