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

DOCUMENT# N20000008200

Entity Name: WECARE CHARITABLE PHARMACY AND HEALTH SOLUTIONS,

INC.

FILED
May 01, 2023
Secretary of State
0251418284CC

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

6801 LAKE WORTH RD STE 206

GREENACRES, FL 33467

## **Current Mailing Address:**

6801 LAKE WORTH RD STE 206 GREENACRES, FL 33467 US

FEI Number: 85-2177458 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

LOUISSAINT, DONNY 6801 LAKE WORTH RD STE 206 GREENACRES, FL 33467 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 VP Title F

Name LOUISSAINT, DONNY Name ELVEUS, JEFFREY

Address 6801 LAKE WORTH RD STE 206 Address 6801 LAKE WORTH RD STE 206

City-State-Zip: GREENACRES FL 33467 City-State-Zip: GREENACRES FL 33467

Title SECRETARY

Name METELUS, BARTHELMY

Address 6801 LAKE WORTH RD STE 206

City-State-Zip: GREENACRES FL 33467

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: DONNY LOUISSAINT

VICE PRESIDENT

05/01/2023