

**2021 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N20000010619

**Entity Name:** JCARE STREET IMPACT CORP

**Current Principal Place of Business:**

1096 VISTA HAVEN CIR  
106  
ORLANDO, FL 32825

**Current Mailing Address:**

1096 VISTA HAVEN CIR  
106  
ORLANDO, FL 32825

**FEI Number:** 86-1514479

**Certificate of Status Desired:** Yes

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

BELMER, JADA K  
1096 VISTA HAVEN CIR  
106  
ORLANDO, FL 32825 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:** JADA BELMER

10/18/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name BELMER, JADA K  
Address 1096 VISTA HAVEN CIR  
City-State-Zip: ORLANDO FL 32825  
  
Title T  
Name SMITH, MARESHAH T  
Address 10113 SHADOW LEAF COURT  
City-State-Zip: ORLANDO FL 32825

Title VP  
Name SMITH, KAREN S  
Address 507 PINE WAY  
City-State-Zip: OCALA FL 34472  
  
Title S  
Name SMITH, STEPHANIE P  
Address 1096 VISTA HAVEN CIR  
City-State-Zip: ORLANDO FL 32825

*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:** JADA KAMILE BELMER

10/18/2021

Electronic Signature of Signing Officer/Director Detail

Date