

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000067007

Entity Name: FOSTER'S CARE MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

3343 ATMORE TERRACE
OCOEE, FL 34761

Current Mailing Address:

1745 E. SILVER STAR RD.
243
OCOEE, FL 34761 US

FEI Number: 26-0349818

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOSTER, SANDRIA J
1746 E. SILVER STAR RD.
243
OCOEE, FL 34761 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	P/S	Title	VP/T
Name	FOSTER, SANDRIA J	Name	FOSTER, EVERTON L
Address	3343 ATMORE TR.	Address	3343 ATMORE TR.
City-State-Zip:	OCOEE FL 34761	City-State-Zip:	OCOEE FL 34761

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SANDRIA FOSTER

PRESIDENT

04/29/2017

Electronic Signature of Signing Officer/Director Detail

Date